SHOWING WE CARE

A CHILD CARE STRATEGY FOR THE 90's

COMPLETE REPORT
OF THE TASK FORCE ON CHILD CARE

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The Honourable Carol Gran
Minister of Government Management
Services and Minister Responsible for
Women's Programs
Parliament Buildings
Victoria, British Columbia
V8V 1X4

Dear Madam Minister:

It is our privilege to submit for your consideration the report and recommendations of the Task Force on Child Care.

Sincerely,

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Finally, the Task Force would like to recognize the contribution of the many parents, individuals and organizations who took the time to submit their concerns and recommendations on the future of child care.

Copies of this report and the Summary and Minority Report of the Task Force on Child Care are available from:

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1. VISION

The Task Force envisions a comprehensive child care system which provides a continuum of services and programs that reflect the changing needs and circumstances of British Columbia children and their families and that value children as our most important resource.

The vision for child care in British Columbia must recognize the changing face of British Columbia families and provide a continuum of quality child care options that range from licensed full and part-time group programs, licensed school-age care, agency supervised and supported family day home care, resource and support services for parents, caregivers and child care programs. The range of child care options would be able to respond to the needs of parents at home as well as meeting families' exceptional care needs. All parents require some form of supplementary care for their children, and all children benefit from contact with other children and families in the community.

Four basic principles are essential to this vision of a comprehensive system:

- that the health and well-being of the child are of paramount importance;
- that the provision of quality child care is a family issue and is required to meet society's needs;
- that the responsibility for the provision of child care is shared between parents, caregivers, the community and all levels of government; and,
- that parents have the responsibility and right to choose the type of care that best suits their family needs.

The Task Force endorses the following description of the role of quality child care –

> **...child care is a comprehensive service to children and families that supplements the care children receive from their families. As a supplement to family care, professional child care is in no way a substitute for such care nor a competitor for the role of parents in the upbringing of their children. To some extent, professional child care represents a version of the extended family, one which is compatible with and adapted to the social realities of the modern world. Virtually all children are reared primarily in their own homes by their own families, and virtually all children receive some degree of supplemental care from people other than their parents.**[1]

A comprehensive child care system will support parents by ensuring that they have options, including the option of staying at home to care for their children, and will actively engage parents in determining the child care environment.

The following definitions describe the baseline standards to which this system should subscribe:

Quality

All families need and are entitled to services of high quality. To ensure high quality, child care services should be licensed and regulated or agency supported, reflecting the best current knowledge about early childhood development as well as the varied cultural and linguistic backgrounds of Canadian families.

Quality applies to the physical environment, health and safety, nutrition and food service, administration, staff qualifications and development, interac-

1 Caldwell, B.M., Hilliard, A.G., "What is Quality Child Care?"

tions among staff and children, staff-parent interaction, programs, staffing ratios and evaluation.

A high quality child care environment is one in which –

the children:

- are respected, valued and nurtured as individuals;
- are encouraged to problem-solve, take responsibility and learn social skills;
- are well-nourished, properly rested, healthy and safe; and,
- participate in age-appropriate activities.

the parents:

- are recognized and encouraged as active partners in the 'shared caring' relationship and the child care program; and,
- are provided with the necessary support and information to enhance their confidence in their parenting skills and their personal sense of self-esteem.

the caregivers:

- demonstrate a strong knowledge of child development principles, appropriate caregiving and programming practices, and positive inter-personal communication skills with children and adults;
- enjoy the children and their activities;
- are interested and supported in upgrading their skills and knowledge; and,
- are respected and appropriately compensated for the important work they do.

the physical environment:

- has ample room and equipment, both indoors and outdoors, for children to flow easily from one activity area to another; and
- is well organized, warm and cheerful with a variety of interesting developmentally appropriate toys and materials in good repair which stimulate children's interest in learning about themselves, their families and the world around them.

and, the atmosphere:

- is positive, accepting, caring, and promotes a sense of belonging and cooperation within the program and the larger community.

Quality should be a consideration in all settings whether home-based or group care.

Accessibility

All children, whether typical or special, should have access to quality child care services, regardless of family income, parental employment status or geographic location. Parents should determine the nature and extent of their children's participation.

Accessibility depends on providing a comprehensive range of child care options. These include: full and part-time care; licensed family day care; supported informal and in-home care; family support programs; services for children and families with special needs; and parental leave and provision for shift, seasonal, casual and emergency care. Accessibility requires providing care for children ranging in age from birth to 12 years, in settings which reflect our rich cultural diversity.

Affordability

"The cost of day care is spiraling as is everything else but I am more than willing to pay for reliable, responsible day care if only there was some available. Of course I cannot pay more than my income... something should be done to help the women of British Columbia."

(Submission from single mother in Burnaby.)

Cost should not be a barrier to access for any family; however, it is presently one of the biggest obstacles. We currently allow the market place to determine the number and type of child care spaces. Yet we would never allow the delivery of education and health services to be determined by market forces.

Child care is an essential social support, as necessary to our economic and social health as the education system. A basic system of affordable quality child care is integral to our continued economic development and social well-being. The question of affordability should be addressed in a way which balances parent contribution with community contribution.

II. INTRODUCTION

The availability of accessible, affordable, quality child care has long been identified as a priority by British Columbians.

In 1981, the United Way of the Lower Mainland's report Responsible Day Care: The Coming of Age of an Essential Community Service, outlined concerns about the lack of integrated planning, policy development and funding to support an efficient, responsible day care system. Subsequently, in 1986, British Columbians responded in large numbers during the federal government's Special Committee on Child Care.

The Report of the Advisory Council on Community-Based Programs for Women (June 1990) identified the critical shortage of quality, affordable child care as a major barrier to women achieving equality, and recommended that the provincial government take immediate action to address this issue. Access to child care was also a major theme presented to the Minister during her provincial tour in the spring of 1990. On July 5, 1990, the Honourable Carol Gran, Minister of Government Management Services and Minister Responsible for Women's Programs formed a Task Force on Child Care to recommend ways to increase the number of affordable, accessible, quality child care spaces in British Columbia.

The nineteen members of the Task Force and eleven consultants provided for regional as well as sectoral representation (See Appendix A for terms of reference and membership). Members and consultants included representatives from the corporate sector, small business, labour, municipal and regional district government, child care advocacy organizations, caregivers, commercial child care operators, community colleges, women's groups, the school system, early childhood educators, hospitals, aboriginal groups, immigrant and visible minority women, and community service organizations.

The Task Force met frequently throughout the fall and early winter of 1990. Although public submissions were not formally requested, the Task Force received over 120 letters and briefs from individuals and groups concerned about child care. The submissions received reflected the diversity of opinion within the Task Force itself. An analysis of the submissions is found in Appendix B. The primary areas of divergence were related to:

- the extent to which the development and monitoring of child care options is solely a private family matter or a shared parental/societal responsibility;
- the most effective means for ensuring the availability of affordable child care options - by giving funds directly to low income families or by ensuring that funds are available to support the development of a range of affordable services within a community;
- the potential impact of supplementary non-parental child care on the overall development of children, especially infants and toddlers;
- the extent to which the provision of child care services in a community would provide support to families who choose to have an at-home parent as their primary child care option;
- the extent and nature of the employers' role in assisting employees to balance their work and family responsibilities; and,
- the extent and nature of the municipal and regional districts' role in the development of community child care services.

The Task Force has attempted to address these divergent viewpoints by developing a child care model that accommodates the needs of a variety of different family situations from single earner families to single parent families to dual earner families. The model is designed to give parents a variety of choices for the care of their children and to remove barriers which inhibit a family from making the best possible choice for their personal circumstances.

III. CHANGING FAMILIES - CHANGING ASSUMPTIONS

Current public policy, both federal and provincial, has been developed on what are now outdated assumptions. The assumption that:

- the majority of families are made up of two parents, one a wage earner and the other a caregiver;
- an extended family lives nearby and is able to provide support; and,
- women's participation in the work force is atypical and related to desire for extra spending money.

It is also falsely assumed that if there is a demand for child care, market forces will respond.

These assumptions have resulted in public policies which focus on assisting families who are financially "in need". Little consideration has been given to the socioeconomic effects of an inadequate supply of quality child care options.

> ***"The traditional family is a shrinking phenomenon.... Although it is obvious that the structure of families has been radically transformed, the conduct of our society has failed to adjust to these changes."***
>
> *(Submission from the University Relations Committee of the Simon Fraser Student Society)*

The "traditional" family of one wage-earner and one caregiver represents approximately 30% of today's British Columbia families,[1] as described in Table 1 below.

In 60% of all Canadian two-parent families, both parents work outside the home.[2] Because more than 50% of Canadian families move every 5 years, often to another town or province, support networks of extended family and neighbours get disrupted and cannot necessarily be relied upon to give the family much needed moral and practical support. As we know, moving disrupts school friends, child care arrangements, spousal careers, the caring for an elderly relative.[3]

In 1990 in British Columbia, 72.3% of women aged 45 to 54 participated in the paid labour force as did 34.2% of women aged 55 to 64. Many of these "traditional" caregiving grandmothers are unavailable because of their participation in the paid labour force.[4]

A significant number of families in British Columbia are headed by a single parent. In 1986, there were 96,640 single parent families (79,140 female head; 17,500 male head). Of these families 15,395 had all children under 6 years of age.[5] Approximately 45% of all British Columbia single parents with children

Table 1:
BRITISH COLUMBIA FAMILIES DECLARING EARNED INCOME WITH CHILDREN UNDER 12 YEARS OF AGE

FAMILY TYPE	POPULATION	PERCENTAGE
2 Parent, single earner	85,100	31%
2 Parent, dual earner	144,700	53%
1 Parent	44,800	16%
Total Families	**274,600**	**100%**

Source: Ministry of Finance, Taxation and Intergovernmental Relations Branch

1 Ministry of Finance, Taxation and Intergovernmental Relations Branch, based on families declaring earnings with at least one child under 12 at home.

2 Health and Welfare Canada/Statistics Canada, Health and Welfare in Canada, H21-102, Ottawa, 1989, p.22.

3 Vanier Institute of the Family, speech entitled Families in the 1990's: In Control or Out of Control, delivered by Alan Mirabelli, May, 1990.

4 Statistics Canada, Labour Force Annual Averages 1990. Catalogue 71-220.

5 Ministry of Government Management Services/Policynet Communications Limited, Women in British Columbia A Statistical Report, 1990, pp. 15 and 16.

under 18 are on income assistance.[6] Thirty percent of off-reserve aboriginal families are headed by single parents.[7]

Real income of families – income adjusted for inflation – is declining. The median family income has not grown since 1979.[8] Even with the growth in the number of working wives across all income strata, families maintained their relative income positions over the period from 1967 to 1985.[9] Without wives' earnings, over three times as many families would have been considered low income in 1985.[9] This change is graphically described in the following excerpt from a speech entitled Families in the 1990's: In Control or Out of Control delivered by Alan Mirabelli of the Vanier Institute of the Family:

> *In the late sixties, the value of the so-called 'family wage' began to decline. Until that time, the wage paid to a male employee was based on the assumption that such a wage would be sufficient to support both himself and a dependent spouse and children. Since then, real incomes of families have been on the decline. In fact the median family income has not grown since 1979. In the 1950's, 45-48 hours per week of paid labour was required to generate a 'family-wage'. In the 1980's, 65-75 hours of paid labour is required for the equivalent 'family-wage'. Is it any wonder that many families have managed to keep their heads above water during the recession and through inflation and unemployment only because the once at-home spouse, usually the wife, has now entered the paid labour force for good?*

"...we live in a time where dual incomes are a must just to survive. It's time the government... dealt with it in a positive, productive, and... speedy manner."

(Submission from parent in Port Coquitlam)

The value of the minimum wage has shrunk. Two spouses working at minimum wage now earn 92% of the poverty line for a family of three. In 1975, one worker earning minimum wage earned 81% of the poverty line for the same family.[10] In 1980, 11.7% of father-headed, lone-parent families were described as low-income; this figure jumped to 21.7% in 1985. In the same year, 42.6% of mother headed, lone parent families were low-income, increasing to 50.9% in 1985.[11]

Table 2
AVERAGE GROSS ANNUAL EARNED INCOME OF BRITISH COLUMBIA FAMILIES WITH CHILDREN UNDER 12 - 1990

FAMILY TYPE	AVERAGE INCOME
Single parent family	$23,355
2 parent, 1 earner family	$47,817
2 parent, 2 earner family	$84,702

Source: Ministry of Finance, Taxation and Intergovernmental Relations Branch.

"The real cost of raising children is a horrendous figure which is frightening more and more people away from having families altogether, or causing them to have much smaller families than they might have been able to support in the past."

(Submission from parent in North Vancouver)

In addition to the economic necessity for both parents to work, there is an increased demand for labour force participation which has a proportional impact on families. Projections for the next 10 years indicate that women, visible minorities and the disabled will constitute a majority of new labour market entrants.

Further, it is estimated that the Federal Five-Year Immigration Plan will result in a 40% increase in the number of immigrants coming to British Columbia - a net population gain of 36,000 immigrants by 1995. Most of the immigrants will settle in the Lower Mainland. Increased investment from immigration will result in the creation of 1800 new jobs over the

6 Ministry of Social Services and Housing (Source: Central Statistics Bureau 1990 projections based on 1986 census data).

7 Indian and Northern Affairs Canada, Highlights of Aboriginal Conditions, Part II - Social Conditions, p.12.

8 Ministry of Advanced Education, Training and Technology, 1990 Environmental Scan, (Source: Statistics Canada).

9 Statistics Canada Catalogue 13-601, July 1989.

10 Vanier Institute of the Family, Family Life in Canada, Ottawa, 1990.

11 Statistics Canada, The Family in Canada, Ottawa, 1989.

next five years, which in turn will create increased demand for child care services.

In British Columbia, as in the rest of Canada, the economic life of the family has changed and as a result child care, for many families, has become an essential service. Noted anthropologist Margaret Mead stated the problem succinctly. "We now expect a family to achieve alone what no other society has ever expected an individual family to accomplish unaided. In effect we call upon the individual family to do what a whole clan used to do." Public policy must adapt to this new reality and provide policies that address this critical loss of support.

Recently concerns have been expressed from different quarters:

- **From Business** - The Conference Board of Canada commissioned a report entitled The Corporate Response to Workers with Family Responsibilities. It stated that "...meeting the needs of workers with family responsibilities is becoming increasingly important to employers and employees alike."
- **From the Post-Secondary Education System** - The Report of the Provincial Access Committee entitled Access to Advanced Education and Job Training in British Columbia recommended "...that improved and more flexible day care facilities be made available".
- **From the European and North-American Conference on Urban Safety and Crime Prevention (1989)** - availability of day care was identified as an important initiative to make urban settings safer.
- **From the Royal Commission on Education** - "The vital importance of the pre-school years in creating the social capital or resources needed for school success is further acknowledged by the Commission. The Commission urges the provincial social services ministries to initiate an examination of the issues in this area and to provide the facilities, resources, programs, and services which will recognize pre-school and child care as social and economic priorities for Canadian families."

Summary

Our economic health depends on a skilled workforce. Our families' health depends on ensuring that families have the resources to balance their work and family responsibilities. Those resources do not currently exist.

Families' child care needs are as varied as families themselves. The traditional notion of 'day care' does not reflect the real and often complex needs that families have in finding appropriate care for their children. The crisis in child care is made up of the often intense, private crises of the individual family.

A comprehensive child care system needs to provide a continuum of quality care options for children from birth to 12 years. It would meet the needs of parents with atypical work hours, including shift work, weekends, and part-time; and would address the needs of rural, special needs, aboriginal and other families with unique cultural traditions as well as families with emergency care needs. Most importantly, it would meet the needs of children for social, emotional, and intellectual growth.

IV. THE CHILD CARE NEEDS OF BRITISH COLUMBIA FAMILIES

"...I realized that it was not my expectations that were too high but the lack of high quality day care facilities available. High quality, reasonably priced day care is a necessity, not a luxury in today's society! We are nurturing the adults of tomorrow...."

(Submission from a parent in Burnaby)

In British Columbia, the majority of children under twelve years of age have parents who work or study either full or part-time and therefore need an alternative form of care to supplement that which their parents provide. One of the terms of reference for the Task Force was "...to determine, more accurately than was previously possible, the increase in the number of child care spaces which will be needed in the short and long term". A comprehensive analysis by provincial health unit is underway but, for the purposes of this report, an initial analysis has been prepared. The results are described in the tables found at the end of this chapter.

This initial analysis estimates the number of children who require child care services and illustrates the gap between the estimated need and the existing supply of licensed and monitored group care facilities and family day care homes in British Columbia.

Need has been defined by estimating the number of children in British Columbia for whom supplementary care must be arranged. Population statistics were provided by Planning and Statistics Division, Ministry of Finance and Corporate Relations. Statistics Canada data were used for labour force participation rates,[1] and those figures were adjusted to full-time equivalents (FTEs) to account for the approximately 30% of women who are employed on a part-time basis. Full-time and part-time participation is described in the following table.

Table 3:
FULL-TIME AND PART-TIME LABOUR FORCE PARTICIPATION OF CANADIAN WOMEN

	FULL-TIME	PART-TIME
with children under 3	68%	31%
with children under 6	69%	30%
with children between 6 & 15	73%	26%

Source: Statistics Canada

The Ministry of Health supplied the figures for the number of licensed child care spaces. These figures included part-time services such as preschool and child minding programs and were also adjusted to reflect full-time equivalents by assuming that three part-time spaces equal one full-time space,[2] even though it is known that these spaces are used by families with an at-home parent.

In summary, the analysis shows that currently there are 120,403 (FTE) British Columbia children under six years of age who require supplemental care. However, there are only 20,582 (FTE) licensed spaces for those children. There are 173,815 (FTE) children between the ages of six and twelve who are not in the care of their parents when school is out but there are only 8,889 (FTE) licensed spaces for them.

1 Statistics Canada Catalogue 71-001 September, 1990.

2 A child may be enrolled in a child minding facility for no more than 3 hours per day and no more than 2 days a week and a child may be enrolled in a preschool for no more than 4 hours a day. These services must therefore be supplemented by some other form of care to meet the needs of working parents, even those who are only employed on a part-time basis.

Table 4:
ESTIMATED CHILD CARE NEED BY AGE

	0-36 MO	3-6 YRS	6-12 YRS
Child Population	127,600	127,200	285,600
Children Needing Non-Parental Care	61,821	58,582	173,815
Number of Licensed Spaces	3,107	17,475	8,889
Number of Children in Non-Licensed Care	58,714	41,107	164,926
% of Children in Licensed care	5%	27%	5%

In British Columbia in 1990, only 10% of the children under the age of twelve who require supplemental care have access to a space in a licensed and monitored group program or family day care home.

The analysis indicates that:

- only 5% of the children in British Columbia between birth and 3 years of age who need care by someone other than their parents are able to access a licensed space;
- only 27% of the child care needs for those between 3 and 6 years of age are being met by licensed facilities; and,
- only 5% of elementary school-aged children are accommodated in a licensed facility.

Therefore, 90% of children for whom supplemental care is required are being cared for in one or more of the following unlicensed situations: in the care of a family member, relative or nanny; in informal care; in illegal care or in self-care. There are no current estimates of how many children are in illegal care or self-care or how many of our children are in substandard care. Parents indicate that they have considerable difficulty finding quality care, particularly for infants and toddlers.

The onus is on parents to choose appropriate care for their children but this implies that there are a variety of options to choose from and that quality care is readily available. This is not so. Few parents have the resources to engage a qualified nanny, to delay choosing a care arrangement until they find one that satisfies their concerns about quality or to remain at home with their children. The decision that most parents face is weighing their anguish about inadequate care against the need to earn a living that will support their family.

The dangers to children in self care are evident. The dangers to children in illegal care may vary depending on the situation. Children may be endangered in homes that do not comply to health and safety standards, or that have too many children to allow for adequate supervision and interaction.

There are also real risks for illegal caregivers: caregivers may be found liable if a child is injured while in their care. While some illegal caregivers choose not to be licensed because they are intimidated by the licensing process, many choose not to apply for licensing so that they do not have to declare their income. As a result, parents with children in illegal care cannot get receipts and cannot claim for child care deductions on their income tax returns. These illegal caregivers are also less likely to accept subsidized children for the same reason.

The initial analysis does not address the issue of preference nor does it pretend to be a measure of demand.[3] However, recent surveys indicate that 50% of the parents who need to arrange supplemental care for their children would prefer to place their child in some form of licensed and monitored setting[4]. If the long term goals for expansion were aimed at supplying licensed spaces for 50% of those who need it, infant/toddler and school-age spaces would have to be increased ten fold and the spaces for children aged three to six almost doubled – an increase of over 100,000 spaces.

The Task Force chose not to establish specific figures for the short and long-term goals for expansion of child care spaces. It was felt that setting

[3] "Preference" refers to the kind of care a parent may wish for their child; "demand" refers to the kind of care a parent would choose based on a combination of factors that include preference, cost, convenience, quality, availability and so on.

[4] Johnson and Lero cited in Griffin p. 102.

targets could only be done responsibly within the context of an appropriate government mandate, supporting infrastructure, resources, and an adequate supply of qualified caregivers. It is also important to establish targets for expansion that address the areas of greatest need but which result in the availability of quality care that is responsive to the community. To accomplish this, strategic planning and coordination will be required. There is no single solution. The barriers that inhibit the expansion of spaces in each age group differ from one another. They also differ from one region of the province to another. However, the Task Force felt that the provincial government must immediately begin the process of planned orderly expansion to close the gap between the critical shortage of spaces and the need.

Table 5

ESTIMATES OF CHILD CARE NEED BY B.C. HEALTH UNIT FOR CHILDREN 0 - 36 MONTHS

HEALTH UNIT	CHILD POPULATION 1989	NUMBER OF CHILDREN NEEDING NON-PARENTAL CARE IN FTE	TOTAL NUMBER OF LICENSED SPACES IN FTE	NUMBER OF CHILDREN IN OTHER CARE IN FTE	PERCENTAGE OF CHILDREN IN LICENSED CARE
EAST KOOTENAY	2949	1429	78	1351	5
CENTRAL KOOTENAY	2606	1262	43	1219	3
NORTH OKANAGAN	3621	1754	52	1702	3
SOUTH OKANAGAN	6137	2973	186	2787	6
SOUTH CENTRAL	4396	2130	168	1962	8
UPPER FRASER VALLEY	6845	3317	88	3229	3
CENTRAL FRASER VALLEY	7903	3829	126	3703	3
BOUNDARY	15055	7294	314	6980	4
SIMON FRASER	7833	3795	64	3731	2
COAST GARIBALDI	2390	1158	55	1103	5
CENTRAL ISLAND	7174	3475	326	3149	9
UPPER ISLAND	4093	1983	48	1935	2
CARIBOO	2917	1413	70	1343	5
SKEENA	4130	2001	48	1953	2
PEACE RIVER	2955	1431	14	1417	1
NORTHERN INTERIOR	5330	2582	197	2385	8
VANCOUVER	15150	7340	336	7004	5
BURNABY	5456	2644	190	2454	7
NORTH SHORE	5526	2678	216	2462	8
RICHMOND	4538	2199	70	2129	3
CAPITAL REGION	10596	5134	418	4716	8
TOTAL B.C.	**127600**	**61821**	**3107**	**58714**	**5%**

SOURCES: Planning and Statistics Division, Ministry of Finance and Corporate Relations.
Statistics Canada, Labour Force Survey
Community Care Facilities Branch, Ministry of Health

NOTES :
1) Figures have been adjusted to reflect that 30% of the children who need care only need it on a part-time basis.
2) Licensed spaces per health unit as noted may be greater than the actual as the Community Care Facilities Branch data collection system was not designed to report capacities in full-time equivalents.
3) Licensed spaces include three children per licensed family daycare home. This assumption inflates the estimated number of spaces available for this age group as studies have shown that many family care providers prefer not to provide care for infants and toddlers.
4) Even though a small proportion of child minding spaces may serve this age group all child minding spaces have been included in the three - six year estimates.

(The 1319 licensed spaces for special needs care, the 939 spaces for residential care and the 42 emergency care spaces were not included in the above (Total 2300). It was not possible to make assumptions about the ages of the children served in these facilities.)

(FTE - Full-time equivalent)

Table 6

ESTIMATES OF CHILD CARE NEED BY B.C. HEALTH UNIT FOR CHILDREN 3 – 6 YEARS

HEALTH UNIT	CHILD POPULATION 1989	NUMBER OF CHILDREN NEEDING NON-PARENTAL CARE IN FTE	NUMBER OF LICENSED SPACES		TOTAL NUMBER OF LICENSED SPACES IN FTE	NUMBER OF CHILDREN IN OTHER CARE IN FTE	PERCENTAGE OF CHILDREN IN LICENSED CARE
			FULL-TIME	PART-TIME			
EAST KOOTENAY	3168	1331	238	307	340	991	25
CENTRAL KOOTENAY	2998	1259	309	304	410	849	32
NORTH OKANAGAN	3865	1623	179	267	268	1355	17
SOUTH OKANAGAN	6552	2752	531	653	748	2004	27
SOUTH CENTRAL	4610	1936	479	352	596	1340	30
UPPER FRASER VALLEY	6930	2910	478	634	689	2221	24
CENTRAL FRASER VALLEY	8258	3469	645	829	921	2548	27
BOUNDARY	15108	6346	1162	1253	1580	4766	25
SIMON FRASER	7053	2962	817	901	1117	1845	38
COAST GARIBALDI	2615	1334	177	275	269	1065	20
CENTRAL ISLAND	7579	3183	806	844	1087	2096	34
UPPER ISLAND	4346	1826	286	516	458	1368	25
CARIBOO	3085	1573	199	262	286	1287	18
SKEENA	4242	2164	205	331	315	1849	15
PEACE RIVER	3056	1559	217	171	274	1285	18
NORTHERN INTERIOR	5618	2865	462	411	599	2266	21
VANCOUVER	13083	6673	1809	1899	2442	4231	37
BURNABY	4678	2386	799	745	1047	1339	44
NORTH SHORE	5287	2696	686	1342	1133	1563	42
RICHMOND	4589	2340	441	737	687	1653	29
CAPITAL REGION	10580	5395	1864	1035	2209	3186	41
TOTAL B.C.	**127200**	**58582**	**12789**	**14068**	**17475**	**41107**	**27%**

SOURCES: Planning and Statistics Division, Ministry of Finance and Corporate Relations.
Statistics Canada, Labour Force Survey
Community Care Facilities Branch, Ministry of Health

NOTES :
1) Figures have been adjusted to reflect that 30% of the children who need care only need it on a part-time basis.
2) Licensed spaces per health unit as noted may be greater than the actual as the Community Care Facilities Branch data collection system was not designed to report capacities in full-time equivalents.
3) Licensed spaces include three children per licensed family daycare home. Part-time spaces are those in child minding centres and Preschools.
4) Three part-time spaces equal one full-time equivalent.

(The 1319 licensed spaces for special needs care, the 939 spaces for residential care and the 42 emergency care spaces were not included in the above (Total 2300). It was not possible to make assumptions about the ages of the children served in these facilities.)

(FTE - Full-time equivalent)

Table 7

ESTIMATES OF CHILD CARE NEED BY B.C. HEALTH UNIT FOR CHILDREN 6 – 12 YEARS

HEALTH UNIT	CHILD POPULATION 1989	NUMBER OF CHILDREN NEEDING NON-PARENTAL CARE IN FTE	TOTAL NUMBER OF LICENSED SPACES IN FTE	NUMBER OF CHILDREN IN OTHER CARE IN FTE	PERCENTAGE OF CHILDREN IN LICENSED CARE
EAST KOOTENAY	7393	4499	86	4413	2
CENTRAL KOOTENAY	7344	4469	136	4333	3
NORTH OKANAGAN	9508	5786	107	5679	2
SOUTH OKANAGAN	15011	9136	394	8742	4
SOUTH CENTRAL	10830	6591	346	6245	5
UPPER FRASER VALLEY	14779	8995	116	8879	1
CENTRAL FRASER VALLEY	18204	11079	291	10788	3
BOUNDARY	32123	19550	570	18980	3
SIMON FRASER	14379	8751	818	7933	8
COAST GARIBALDI	5179	3152	29	3123	1
CENTRAL ISLAND	18332	11157	518	10639	5
UPPER ISLAND	9786	5956	113	5843	2
CARIBOO	7537	4587	88	4499	2
SKEENA	9154	5571	49	5522	1
PEACE RIVER	6577	4003	109	3894	3
NORTHERN INTERIOR	13240	8058	364	7694	5
VANCOUVER	29380	17881	2389	15492	13
BURNABY	10807	6577	403	6174	6
NORTH SHORE	11646	7087	705	6382	10
RICHMOND	10595	6448	622	5826	10
CAPITAL REGION	23796	14482	636	13846	4
TOTAL	**285600**	**173815**	**8889**	**164926**	**5%**

SOURCES: Planning and Statistics Division, Ministry of Finance and Corporate Relations.
Statistics Canada, Labour Force Survey
Community Care Facilities Branch, Ministry of Health

NOTES :
1) Figures have been adjusted to reflect that 30% of the children who need care only need it on a part-time basis.
2) Licensed spaces per health unit as noted may be greater than the actual as the Community Care Facilities Branch data collection system was not designed to report capacities in full-time equivalents.
3) The remaining number of spaces in Family dayhomes, after two in each home have been designated to 0 - 3 year olds and three in each home have been designated to 3 - 6 year olds, are designated to this age group.

(The 1319 licensed spaces for special needs care, the 939 spaces for residential care and the 42 emergency care spaces were not included in the above (Total 2300). It was not possible to make assumptions about the ages of the children served in these facilities.)

(FTE - Full-time equivalent)

V. HOW CHILD CARE IN BRITISH COLUMBIA IS CURRENTLY DELIVERED AND SUPPORTED

The ministries involved in the delivery, regulation and staffing of child care services in British Columbia are the Ministries of Social Services and Housing, Health and Advanced Education, Training and Technology. Each plays a specific role in supporting the delivery of child care. The Ministries of Provincial Secretary and Government Management Services and Minister Responsible for Women's Programs also play a role. The three key ministries have explicit, discrete responsibilities for certain aspects of child care funding, regulation and training.

No one ministry has been given the responsibility for overall coordination, planning, monitoring, evaluating or expansion of services.

The only vehicles for coordination of services and planning for new service development are the Deputy Minister/Cabinet Committees on Social Policy. The Provincial Child Care Facilities Licensing Board exists to address issues relating to regulations and certification for licensing. Interministry committees are established to address specific concerns as they arise.

The Role of the Ministry of Social Services and Housing

The Ministry of Social Services and Housing delivers its day care programs under the Guaranteed Available Income for Need (GAIN) Act. This legislation is broad and enabling. Regulations and Schedules pursuant to the Act more narrowly define the parameters for policy.

The mandate and mission statement of the ministry focus on providing assistance to people in order to help them to regain or achieve self-sufficiency. It is within this narrower context that the Ministry of Social Services and Housing programs related to child care are delivered.

The Ministry of Social Services and Housing delivers the following programs related to child care:

- **Day Care Subsidy Program:** Assists eligible families in meeting the day care needs of children up to and including 12 years of age. Day care is a family support service which enables parents to prepare for and/or maintain employment and financial independence, and provides relief during prolonged illness or other family crises.
- **Special Needs Day Care Program:** Facilitates the optimum participation of children with special needs in day care programs through the provision of extra supports which address the child's specific needs. It is a family support service enabling parents of children with special needs to prepare for and/or maintain employment and financial independence.
- **Day Care Grants Program:** Assists non-profit societies which do not have the financial resources to pay for essential costs associated with maintaining or creating day care spaces. The following types of grants are available: emergency repair, relocation and start-up assistance.
- **Day Care Support Program:** Enhances the availability and quality of informal care arrangements, including licensed, informal and in-own-home care, and assists subsidized parents in selecting these arrangements. Its goal is to enable subsidized clients to remain financially independent through access to day care arrangements that meet families' needs. Impact on expansion is

not known at this time as the programs have only recently been implemented across the province.

The Role of the Ministry of Health

The Ministry of Health is responsible, through the Community Care Facility Act, the Provincial Child Care Facility Licensing Board, and health units for licensing, inspecting and monitoring child care facilities and registering early childhood educators. This ministry has no funding programs specifically for the provision of child care. However, the Speech, Language and Early Intervention Program provides funding for therapy services to child development centres, which offer child care to handicapped children.

The Community Care Facility Act and the Child Care Regulation, set out various categories of licensed day care and program standards by giving the physical requirements, maximum hours of care, number of children, and staff-to-child ratio for each category.

The administration of the licensing process is performed by the Provincial Child Care Facilities Licensing Board. The Board is responsible for:

- approving the issuance of interim permits and licences and Early Childhood Education certificates;
- suspending or cancelling interim permits and licenses and Early Childhood Education certificates;
- approving of variances to the Act or Regulation; and,
- approval of early childhood education training programs.

The Provincial Child Care Facilities Licensing Board has delegated the following responsibilities to local Medical Health Officers:

- issuing interim permits and/or licenses; and
- amending licenses.

Further, the Medical Health Officer, through the Act, is responsible for investigating all complaints.

The Role of the Ministry of Advanced Education, Training and Technology

The Ministry of Advanced Education, Training and Technology plays an indirect role in the development of curriculum and delivery of early childhood education training. The Ministry has a coordinating role to ensure that provincial funding to post-secondary institutions is distributed equitably among institutions and used efficiently and, to oversee program mix and distribution. Currently, all British Columbia colleges have programs to train early childhood educators.

The Role of the Ministry of Tourism and Provincial Secretary

In June 1989, lottery funds were made available for the capital costs of building, renovating and expanding day care centres. Non-profit societies may apply for one-third of the capital costs through this fund after they have raised the initial two-thirds.

The Role of the Ministry of Government Management Services and Minister Responsible for Women's Programs

The mandate of Women's Programs is to assist government to address ways in which women can achieve economic, social, and political equality. Child care, although not specifically a women's issue, is often central to the achievement of economic equality. Women's Programs supports achievement of this government-wide goal by working with other ministries to address policy impact and to plan effectively for and coordinate new and existing services.

Interministry Committees and Boards

- **Provincial Child Care Facilities Licensing Board:** The Board is made up of three representatives of the Ministry of Health, two from the Ministry of Advanced Education, Training and Technology, and three from the Ministry of Social Services and Housing. The Board administers the Community Care Facility Act and Child Care Regulation which set the health, safety and program standards for the centres, and establish the educational requirements for day care workers.

- **Advisory Committee on Day Care for Public Service Employees:** This committee was created in response to a government initiative to actively promote and encourage employer sponsored day care. Representatives from the Ministries of Social Services and Housing, Health, Solicitor General, Women's Programs, Government Personnel Services Division and British Columbia Building Corporation are on the Advisory Committee. The Committee is charged with establishing day care for the children of government employees. To date, the Ministry of Health has established a 12 space infant centre. The committee is currently working toward the development of another centre in Victoria. This project is expected to establish policies and guidelines for future projects in other areas of the province.

The Role of the Government of Canada

- **Canada Assistance Plan (CAP):** The Canada Assistance Plan, administered by Health and Welfare Canada, is the federal government program under which cost-sharing for day care is provided to the Province. It has a major impact on the basic framework and structure of provincial day care programs.

  Under CAP, the province recovers up to 50% of the expenditures for subsidies to parents using non-profit day care. CAP does not apply to services provided by commercial day cares and covers only about 18% of the costs of the Day Care Grants Program.

  In 1989, through Bill C-69, the federal government placed a ceiling on CAP which restricted cost-sharing increases to a maximum of 5% for a 2 year period. British Columbia and other provinces are challenging Bill C-69 in the courts. There is potential for loss of revenue to British Columbia of between $10 and $30 million.

- **Child Care Initiatives Fund:** A survivor of the Federal Child Care Strategy, this fund was established to encourage innovative day care programs by enabling non-profit societies and employers to test new ideas.

Summary

British Columbia faces the challenge of ensuring that there is a sufficient supply of affordable, accessible, quality child care. Government initiatives undertaken to date have had a negligible effect on expanding child care spaces.

The present challenge is to coordinate and expand child care in view of:

- the fragmentation of responsibilities between ministries, which inhibits effective coordination and planning;
- each ministry's narrow interpretation of its role within its own mandate, resulting in critical child care issues not being addressed; and,
- insufficient funding to provide adequate service.

These problems combine to promote a system whereby no one ministry is actually responsible for the overall quality of service delivery or maintenance.

These issues are described in greater detail in the sections of this report dealing with mandate, staffing, regulatory functions and funding.

VI. CONTINUUM OF CARE - BARRIERS AND SOLUTIONS

The Task Force examined the problems associated with the expansion of child care from a number of different perspectives. What do parents need and want? What problems are caregivers facing and how do different types of caregivers experience those problems? What role should the three levels of government play? How can stakeholders and potential partners be most effectively involved?

The Task Force discussed a variety of solutions. Many of these will require considerable research and investigation to determine their feasibility. The solutions have been incorporated into the sections of the report which address these barriers in detail. Following is a brief description of the barriers and their impact on the expansion of different types of care.

Expanding Opportunities for Parent Care

In looking at the range of care options currently available, the Task Force included parent care as the cornerstone upon which other forms of care provide a supportive network.

Thirty-one percent of British Columbia families with children under 12 are traditional two parent, one-income families. For many families, this situation is the ideal, particularly where care of infants and toddlers is concerned. Considering that high quality, reliable care for infants is almost impossible to find, it would seem wise to look at ways in which we can assist parents who wish to care for their own children to do so.

However, it is important to understand that parents who stay at home to care for their children are also users of child care. The existing 12,000 nursery school spaces and over 2,100 child minding spaces are used predominantly by this group. As well, community recreation programs and emergency care programs support the at-home parent.

Currently, parents at home, or those wishing to care for their children at home, face several barriers. The predominant difficulty is financial: most families simply cannot afford to have only one earner. The most significant barrier for parents wishing to increase the amount of time they have to provide direct care for their children is the lack of support to balance work and family responsibilities. As well, those parents who do stay at home to care for their children may need access to support and assistance.

The potential solutions considered were: changes to the tax system to remove dis-incentives to parents who wish to stay home to care for their children; changes to the GAIN Act to allow single parents to remain at home with dependent children and to remove obstacles to operating home-based businesses; the introduction of a child tax credit for low-income families; and the development of expanded parental leave at both the government and corporate levels. It was noted that expanded parental leave is especially useful to families with infants and toddlers and may be less expensive both to families and government than relying solely on non-parental caregiving options.

Supports examined included:

- services which promote positive parenting skills and increase parents' confidence;
- information to families about services and programs available in their community;
- increased availability of family support services such as family drop-ins, parent/child play groups, pre-school spaces, etc.; and,
- 'respite care' at the community level to help parents at home with their children avoid burnout.

Expansion of Home-based Child Care Spaces

For the purposes of this discussion, home-based child care includes care provided in: a licensed family day care home (regulated care for up to seven children of specific age groups); an informal family day care home (care that does not require licensing, for up to two children not related to the caregiver by blood or marriage); the child's home (by a baby-sitter, nanny or extended family member); and, outside the home by an extended family member.

- **Family Day Care:** There are two types of legal family day care in British Columbia - licensed and informal. The distinction between them is based upon the number of children a caregiver wishes to care for. Many family day cares may be caring for more than two children without a license - this constitutes illegal care. If parents are to be provided with quality options, support must be available to both licensed and informal caregivers so they may provide quality care.

  Family day care should not be viewed as a smaller version of group care, but rather as a different type of care provided in a home environment. Family day care is an attractive option for parents, many of whom choose family day care because of the home environment and potential for fewer children. This is especially true of the informal family day care caring for two or less children. This low child/adult ratio is especially attractive to parents of toddlers and infants.

Barriers to the expansion of licensed family day care fall into three broad categories: complex provincial regulatory processes and restrictive municipal and regional district bylaws; lack of incentives and supports to family day caregivers and parents; and lack of public understanding. The most significant barrier to expansion of quality informal day care has been the lack of support programs for caregivers.

Potential solutions to overcoming barriers to expanding both informal and licensed family day care included: reviewing provincial regulations to allow for more flexible groupings; providing a range of support services to family day care operators through agencies or support programs; developing a proactive and consistent municipal and regional district approach to support the expansion of family day care; improving access to funding for family day care operators; and, improving public understanding and awareness of the role and value of family day care.

For other home-based care options, such as babysitters, nannies and extended family members, it was felt that the various supports recommended to expand opportunities for the at-home parent would benefit these caregivers as well.

Expansion of Group Care Spaces

For the purpose of this discussion, group care refers to centre-based care provided to children ranging from birth to 12 years, including nursery school and school-age child care.

When speaking of day care, the group day care centre is probably the first image that comes to mind. In fact, the greatest proportion of children receiving licensed care (36%) are in group care centres. Most group centres tend to serve children aged 3 to 5 years. Because of the increasing demand for infant and toddler care, some centres have expanded or been created to serve these children. Many parents choose group care because of the increased opportunities for socialization with other children of a similar age, generally higher levels of caregiver training, team of caregiving staff, the child-centred environment and the sense of establishment and reliability.

While group day care suffers from some of the same problems that affect family day care, it also experiences problems of a different order. Most centres experience ongoing problems related to recruiting and retaining qualified staff. As well, centres are more likely to experience difficulties with capital and operational funding.

Potential solutions discussed identified the need to stabilize the staffing crisis immediately through adequate salaries, enhanced training and development of career opportunities. Funding and financing options included both direct funding (capital, operating, loans, and grants) and indirect financing through development levies, tax incentives to business, and enhanced subsidy levels.

Expansion of Child Care Spaces for Children of Specific Ages

Age specific barriers also impede the delivery of high quality child care services.

- **Infant and Toddler Care:** The proper care for infants and toddlers is physically hard work and requires special equipment, a highly child-proof environment and a meticulous approach to health and caregiving routines. For these reasons, many family day home caregivers are not interested in looking after this age group. Those who do often will not make long term commitments. As a result, instead of having a secure beginning at a time when continuity of care is of paramount importance, very young children may experience ever changing caregivers and approaches. Meanwhile, the parents of these infants and toddlers are desperately having to search for a reliable ongoing child care solution.

  Group programs for infants and toddlers are costly. To meet acceptable standards of care, the staff/child ratio is not more than 1:4 and the group size is restricted to a maximum of 12 spaces. High parent fees are necessary to cover staff and special program costs and any reduction in revenues, be it a bad cheque or a temporary fluctuation in enrollment, can cause a program to run at an immediate deficit. Non-profit societies are therefore unwilling to take the risk of expanding their services to include infant and toddler care. Those few infant/toddler programs that have been established are subsidized in one way or another: as part of a group of services which, through fees charged for other services, subsidize their infant/toddler programs; in facilities that are provided with rent free space and utilities; or operated by institutions or agencies which subsidize the operating costs.

  Alberta, Manitoba, Quebec, Prince Edward Island and the Yukon have addressed this problem by providing enriched operating grants as incentives for the care of infants and toddlers. A number of European countries have found another solution; the improvement of the parental leave options for those with very young children. In British Columbia this would require federal and employer cooperation.

- **Preschoolers:** Preschoolers, aged three to six, are the best served sector. As noted above, family caregivers are likely to prefer caring for children of this age and this is the age group for which the majority of licensed group spaces have been established.

  It is important to note that there are publicly perceived differences between preschool and day care which occasionally affect parental choice and as a result may create a barrier to quality for the child. The perception is that a preschool, sometimes called nursery school or play school, is academically and intellectually enriching and that a day care provides only custodial care. A high quality child care program, whether preschool or day care, is staffed with people who have been required to follow the same course of post-secondary study and who are providing for the social, emotional, physical and intellectual needs of the children in their program. The only difference between these two services should be their duration; preschool is a part-time program unlikely to meet the needs of working parents and day care is usually a full-day program which does respond to the need of working parents. However, there are poor quality examples of both. Some parents, misled by the "preschool is better" perception arrange complex days for their children which include a variety of environments; the child's own family; the preschool; the family caregiver; a part-time space in a day care. Each of these arrangements has a different set of people with whom the child must interact and a different set of ground rules. It is important for parents to be aware of the research that says that as long as the care arrangements are consistent, of good quality and stable a child will thrive.

- **School-age children:** For school-age children the barriers and problems are different. Few schools have on-site school-aged child care programs and few off-site school-aged programs or family caregivers can offer transportation to and from the school. Further, because of the part day nature of the care and the complicated scheduling around the school calendar, many caregivers are not interested in providing care for this age group. Parents are often forced to leave their children in before and after school "self-care". Elementary school-aged children need the support and comfort of a caring adult as they mature and develop in a "peer-pressured" society.

Research is now clearly indicating the long term and sometimes devastating effects of insufficient supervision and inadequate programming for this age group.

Another problem for school-aged children arises because of the need for coordination, collaboration and cooperation between the multiple parties responsible for their care and development: the parents; the school team; the child care provider; the speech therapist or psychologist, etc. Workable lines of communication, which ensure that a child receives consistent care from all sources, are more complex for the school-aged child and require the attention of all parties.

The most obvious and cost effective solutions for expansion of school-age care are to deliver school-based child care programs and to amend regulations pertaining to family day care to allow more school-aged children to be cared for. This would remove access issues and would use existing resources already funded by tax revenues.

Meeting Exceptional Care Needs

The Task Force was aware, through the experiences of individual Task Force members, consultants, and submissions from members of the public, that families' needs for child care far exceed the 8:00 to 5:00, Monday to Friday time frame implied by the term 'day care'. Hence, the references throughout the report to child care.

Exceptional care includes the following: care for children of shift workers (including nights and weekends) and seasonal workers; care for sick children (including the medically fragile); care for children of acutely and terminally ill parents; care for children with special needs; care that recognizes and reflects other cultures; and, care that is accessible to rural families.

To meet these circumstances, a flexible approach is required. We tend to assume that these situations affect only a few families. However, these situations reflect what many families have to deal with on a day-to-day basis. For parents affected by these exceptional circumstances, the problems associated with child care are fundamental to the well-being of the family.

VII. THE MANDATE AND MEANS TO DELIVER QUALITY CHILD CARE

"Our social policies must reflect the desperate need of working parents who require safe, quality and affordable day care for their children." *(excerpt from parent letter)*

Current Situation

Currently, no single ministry has the responsibility to oversee the development, delivery and support of a full range of child care options. (See Section V - How Child Care is Currently Delivered and Supported.)

The delivery and expansion of quality, accessible and affordable child care requires the articulation of a mandate and the creation of a delivery vehicle which will:

- enable the development, delivery and support of a continuum of quality care options;
- be able to respond effectively to community needs and initiatives;
- result in the coordination and simplification of the existing system;
- make the most efficient use of resources;
- be publicly accountable; and,
- incorporate ongoing monitoring and evaluation of clearly articulated objectives.

A New Approach to Child Care Development and Expansion

"...government must create and maintain the support mechanisms that families require. It must make available all various methods of child care, informal as well as formal. Different children and parents require different child care alternatives and these alternatives must be made available if we have the children's needs at heart."

(Submission from the Ad-Hoc Inter-Church Coalition on Child Care)

The Task Force identified the need to articulate a comprehensive mandate which encompasses all the features necessary for the development and delivery of quality, affordable, accessible child care. The current approach, which links child care policy to income assistance policy and expects the market place to respond to need, has proven to be ineffective.

A vehicle must be designed to deliver the child care mandate. While coordination between existing ministries involved in child care may be possible, each ministry's necessarily narrow perspective on child care will continue to inhibit the development of a comprehensive service.

To avoid duplication of existing services or increased bureaucracy, the mechanism chosen to develop and deliver child care must result in the simplification of the existing system and must be flexible and responsive to local needs.

The Task Force considered different models for delivering the child care mandate, including a Ministry of the Family, a Child Care Commission, and a Premier's Council on Child Care. Rather than choosing a definitive model, the Task Force has articulated the following principles and criteria which must be considered in the design of an effective provincial child care authority.

Principles

- Child care services are an essential support for a healthy economy and must be recognized as a public priority required at some point by a majority of families to allow parents to enter or remain in the workforce, pursue education or training, or participate in the voluntary sector.

- It is the responsibility of the provincial government to develop, deliver and coordinate a comprehensive, high quality child care system that is accessible and affordable to British Columbia families.
- The mandate for delivery of child care should be legislated. The recent Ombudsman's Report recommends legislation as the most effective way to reinforce "...uniform and integrated approaches to child, youth and family services". However, if legislation will result in delaying the articulation of a mandate and the creation of an appropriate delivery system, it should be a long term rather than short term consideration.

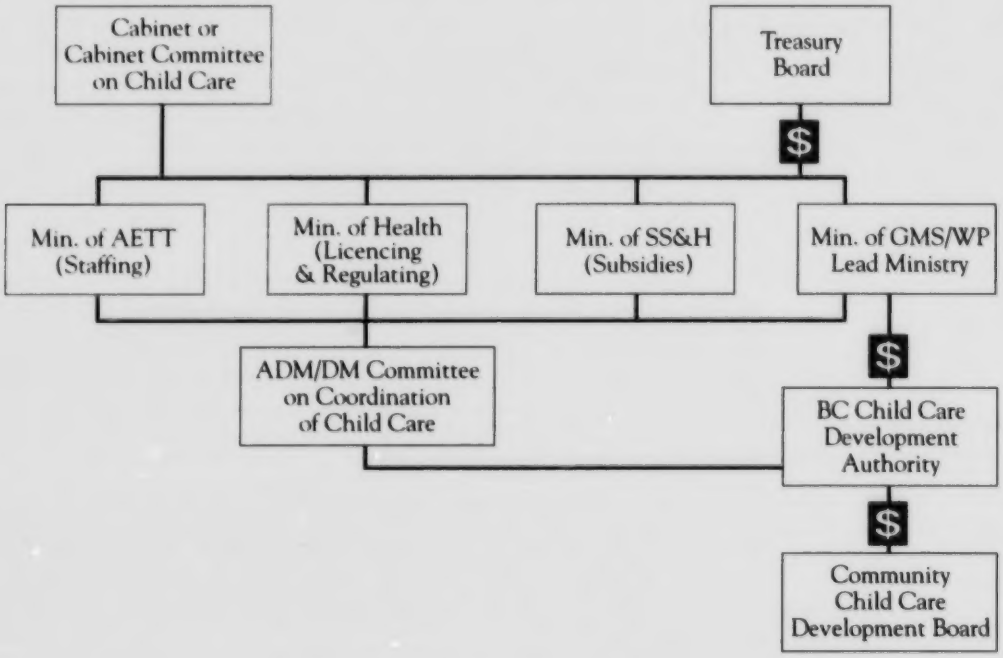
Criteria

The new child care authority must incorporate the following features to ensure an effective delivery system (See Figure 1):

- It must have the overall responsibility and accountability for overseeing the mandate, including staff and financial resources.
- It must be independent of the existing ministries, but have access to senior level planning committees to ensure program coordination.
- It should report directly to the Minister Responsible for Women's Programs at least for an identified period, until the most effective reporting structure can be determined.
- It must have the capacity to establish provincial priorities, carry out planning, develop programs, monitor and evaluate, with priority given to the immediate establishment of an evaluation baseline by which to measure its effectiveness.
- It must have the capacity for ongoing public input and direction. One way of achieving this is

Figure 1

A POTENTIAL MODEL FOR DELIVERING CHILD CARE


Cabinet or Cabinet Committee on Child Care
Treasury Board
$
Min. of AETT (Staffing)
Min. of Health (Licencing & Regulating)
Min. of SS&H (Subsidies)
Min. of GMS/WP Lead Ministry
ADM/DM Committee on Coordination of Child Care
$
BC Child Care Development Authority
$
Community Child Care Development Board

through the creation of an advisory board involving the key stakeholders.

- Delivery of any existing program for developing, regulating and maintaining child care services must occur in conjunction with this child care authority and may in the future be included as its direct responsibility.
- It should enable the delivery of community-based child care services which reflect communities' unique needs and allow local autonomy, responsibility and accountability for program implementation.
- It must consult with individual ministries to help identify data sources useful to planning, and work collaboratively on an evaluation strategy of the objectives and expected outcomes of the proposed child care initiatives.

The Task Force is cognizant of the significant systemic change to current policy required with respect to providing British Columbia families with equitable access to a range of affordable high quality child care options and family supports. It is critical that some reflective capacity be built into the change process. A commitment to responsible expenditure of public dollars in any policy initiative requires a rigorous approach to tracking both the expenditures and the expected outcomes or effects of the policy initiative. To this end, the Task Force strongly supports that appropriate evaluative measures grounded in reliable baseline data be incorporated into the recommended new policies and programs to provide for ongoing collection of accurate and policy-relevant data on which to assess effectiveness and to build future initiatives. One important source for this process would be the data already collected for the National Child Care Study; specifically the data on British Columbia families and their child care arrangements. The data are particularly relevant as they offer information not only on the current arrangements, needs and preferences of a broad range of parents, from at-home parents through to student parents, and parents employed in a wide variety of labour sectors and work schedules, but also on the stresses related to juggling work and family responsibilities.

RECOMMENDATIONS

THE TASK FORCE RECOMMENDS THAT:

1. the provincial government accept as its mandate the responsibility to develop, deliver and coordinate an adequately funded, comprehensive, high quality child care system that is accessible and affordable to British Columbia families;

2. Women's Programs be identified as the lead ministry responsible for overseeing the implementation of the short and long term goals identified in this report and that this role be reviewed in five years;

3. an authority such as a board, commission or council with representative community input, reporting to the Minister Responsible for Women's Programs, be created. And that the authority be given the overall responsibility, accountability and adequate staff resources to expand child care including: establishing provincial priorities, planning, program development and implementation, development of a comprehensive data collection and analysis system, monitoring and evaluation; and,

4. the provincial government work toward enshrining its child care mandate and delivery system in legislation.

VIII. COMMUNITY-BASED DELIVERY

The effective delivery of a continuum of care options will, to a large degree, depend on resources, services and information, that exist or are available at the local level. Effective delivery and efficient use of public funds will result when communities are supported to assess their particular needs and have access to resources and expertise to plan for, implement and manage a responsive and innovative set of services to address these needs.

The Task Force is clearly committed to the development of provincial coordination, policy development and program delivery by the newly created authority. There are many functions, including data collection, research, development and design criteria, standards, etc., which should not be duplicated in many small communities. However, the Task Force recognizes that there is no cookie cutter approach to child care delivery. While needs and preferences will vary from community to community, certain common features should be considered basic across program delivery:

- the integration of children with a variety of needs and backgrounds; and,
- the acceptance and encouragement of cultural diversity.

This means that, in addition to child care services that meet the needs of typical children whose parents work a standard Monday to Friday work week, an effective child care delivery system must take into account the diversity of needs and circumstances that exist in our communities. The Task Force considered a number of such needs including: rural child care issues, aboriginal child care needs, child care considerations for immigrant and visible minority families, child care for children with special needs and child care to meet needs arising from a number of exceptional circumstances.

Child Care Considerations for Rural and Isolated Families

The Task Force identified a number of barriers to the provision of accessible child care services in British Columbia's rural and isolated communities. These include:

- **geographic barriers** such as distance between homes, town and services; transportation difficulties; and isolation.
- **economic barriers** such as higher rates of poverty/lower incomes; and seasonal work/revenue.
- **political barriers** included lack of awareness at local political level of the need for rural child care services.
- **resource scarcity** resulting from lack of credentialed child care staff; and lack of specialists.

Perhaps of most significance is the impact of values and attitudes. Many beliefs about rural families are based on the notion of the idyllic farm life where women are at home to care for their children, who play alongside their parents as they work in the fields. The reality is considerably different: children play in areas containing heavy duty equipment and dangerous chemicals while parents attempt to keep one eye on them. This has a double impact on farm workers who, because of the seasonal and on-call nature of their work, often have to bring their children with them. Children will continue to be hurt and even die if safe options for their care are not provided.

For the most part, centre-based care programs will not meet the needs of rural families. To be workable, solutions will have to be flexible, such as: drop-in centres, child care registries, and mobile centres. The barriers identified by the Task Force are consistent with the findings of the Ontario Ministry of Commu-

nity and Social Services' study on rural child care needs. The Ontario report indicated a substantial need for increased, flexible child care, building on local strengths and services. Ontario has implemented a rural child care pilot project program to test innovative responses to rural needs. Two rural communities have used this program to take a unique approach to their problems. They have purchased a trailer which is set up on school property in town during the winter and moved to summer sites to meet seasonal agricultural demand.

Child Care Considerations for Aboriginal Families

Aboriginal families and communities have had their potential for healthy functioning undermined over a long period of time. The impact of this cultural disintegration must be a major consideration in any attempt to develop meaningful, culturally-appropriate, supportive child care programs for aboriginal families. This context is described more fully in the Background Paper entitled An Approach to First Nations Child Care.

Cultural integrity is a major consideration for aboriginal families whether child care programs are provided on or off reserve. Native organizations have argued that standards for child care centres are too rigid for remote communities, in addition they often conflict with aboriginal cultural norms and practices. The challenge we face is to develop child care models, consistent with aboriginal cultural values, which protect the health and safety of children. There are several successful examples of aboriginal child welfare programs that could be models for culturally appropriate child care programs.

Bands face unique problems in developing child care on reserves. Presently there are 11 aboriginal child care centres on reserves in British Columbia, four of which are sponsored by Indian and Northern Affairs Canada. The federal government is responsible for on-reserve status Indians; the Province assumes responsibility for child care and other social service programs delivered off-reserve. The continuing debate among federal, provincial, territorial governments and aboriginal organizations over responsibility for delivery of aboriginal social programs hampers development of much needed programs.

"Many obstacles were encountered. To become licensed, a facility must be inspected by Health and Fire officials and must meet minimum standards. Obtaining the Public Health Inspection was no problem. However, the Provincial Fire Inspector refused to do an inspection because the facility was on-reserve and was out of his jurisdiction. Finally the Band was able to have the inspection done through Labour Canada - Public Works (out of Vancouver) and we obtained our license."

(Submission from St. Mary's Band, Cranbrook, B.C.)

The difficulties which Bands face in developing child care centres on reserves, arise from having to deal with two jurisdictions. Other difficulties described by the St. Mary's Band include the lack of federal social assistance funding to provide subsidies for needy families and the need for federal funding to upgrade facilities and equipment. Difficulties in recruiting qualified aboriginal staff, because of barriers experienced by aboriginal people in meeting entry requirements in local community colleges, was also of concern.

The Province should continue to negotiate with the federal government to ensure that Native families living on reserves have access to necessary child care development resources. Both levels of government should address activities on their part which result in barriers to aboriginal child care development on reserves.

Child care programs offered off-reserve do not generally integrate aspects of aboriginal culture into their programs. This integrated approach is important, whether or not any aboriginal children take part in the program. Our children should be knowledgeable and sensitive to other cultural values. It is not sufficient to have a "aboriginal" day once a year. Native families will feel more inclined to enrol their children in child care programs that demonstrably value their involvement. The most effective way of ensuring cultural integration is to increase the number of aboriginal child care staff.

It is around the following guiding principles that the system for aboriginal child care is proposed.

Given the diverse cultures of the British Columbia First Nations community, it would be inappropriate to attempt a prescriptive approach to child care, as it would in any other context. Instead, these principles are translated into recommendations which focus on community-driven programs that reflect culturally appropriate values:

- the aboriginal child is part of the family, the extended family and the overall First Nations community;
- the needs of the aboriginal child are central to any aboriginal child care system;
- child care must reflect positive community values – this is the responsibility of the First Nations community;
- aboriginal child care must emerge from and be governed by the First Nations communities; in both reserve and off-reserve communities;
- First Nations child care must be culturally appropriate and have the flexibility to reflect the diverse cultures of the First Nations community;
- child care must be community-driven and meet the needs of the First Nations community; and,
- regulation for the protection and quality of care of the child are an important part of the First Nations child care system.

The right and responsibility to develop a quality system of child care for aboriginal children rests with the aboriginal community. Therefore, a specific aboriginal child care program has not been developed by the Task Force; rather, the components have been generated by First Nations people as critical elements in the development of quality aboriginal child care.

A culturally-appropriate and quality aboriginal child care program, designed to redress the loss of cultural identity and pride, must incorporate the following components:

- aboriginal language training;
- inclusion of the best aspects of First Nations child care practices from traditional and current early childhood education skills;
- parental involvement;
- development of aboriginal child care expertise;
- flexible delivery models; and,
- high degree of community voluntary involvement.

The Task Force, while supporting a range of quality child care options for all children, recognizes the importance of cultural identity for these children.

Child Care Considerations for Immigrant and Visible Minority Families

The child care needs of immigrant and visible minority children are the same as child care needs of all children. They require sensitive, caring adults, who meet not only their physical needs, but are concerned for their intellectual, social and emotional growth as well.

The basic safeguards that we maintain to protect children and ensure quality care apply also to children of immigrant and minority families. The children most in need of such protection and quality control are the children of those who, in their struggle to survive economically, find themselves unable to adequately monitor the care received by their children. Immigrants and refugees are often at the bottom of the economic ladder. In their struggle to get a firm foothold on that ladder, quality, accessible, affordable child care is an absolute necessity. The financial cost is more than repaid by the economic, social and cultural contributions that the immigrant communities make.

Many children born in British Columbia enter school at age 5 fluent in a language other than English. Access to integrated child care settings, either on a full-time or part-time basis, eases their transition into the formal school environment. In addition to developing confidence in speaking English, children learn from their earliest years to accept and celebrate differences. The long-term savings of this integrated approach will be reflected in less racial conflict and the attendant reduction in costs to the taxpayer.

Immigrant families may be nervous to entrust their children to caregivers who are perceived to be insensitive to cultural values. Consideration should be given to recruiting and training caregivers from immigrants and refugees who arrive in Canada and

possess skills that are not only appropriate but desirable in a caregiver.

Day care information should be translated into representative languages to encourage participation of ethnic minorities. As well, having members from minority groups functioning in leadership positions in child care settings provides significant role models. The advantage of different child-rearing and nurturing styles as well as attitudes and values from other cultures can enrich not just the child care milieu but society as a whole.

Child Care Considerations for Children with Special Needs

Whether integration into mainstream community programs works well is no longer a central question of child care for children with special needs. All children with special needs, including physical and mental disabilities and exceptional health care needs, benefit from attending an integrated quality child care program. Integration with 'typical' peers provides children with special needs irreplaceable opportunities to develop and enhance their social skills and adaptive behaviours.

As well, the positive impact on the attitudes and values of 'typical' children and families participating in integrated mainstream programs has been repeatedly demonstrated over the past decade.

The question now is "how" community-based mainstream programs can be designed, and support services and resources coordinated to maximize the effectiveness.

Clinical studies and field research programs have clearly indicated that two features are essential to developing and maintaining quality integrated mainstream child care programs:

- meaningful parent involvement and a family focus; and,
- appropriate resources - health care professionals (speech/occupational/physio therapists, and public health nurses), family support workers, early childhood education consultants, etc., - available to provide hands-on therapy as required, consultation, monitoring, training, program development and feedback on a child specific basis.

Along with all the barriers experienced by families in British Columbia when they are searching for quality child care, families with children with special needs currently meet a series of additional difficulties. These difficulties and frustrations include:

- families with children that have special needs do not have the same child care options as families with children who are typical because the Special Needs Day Care Program is delivered differently from child care for typical children; and,
- there are severely limited resources, and a critical lack of coordination of available resources, to provide quality integrated mainstream experiences for children with special needs.

In the existing child care system, funding follows the child for those families which are eligible for subsidy. Generally, for families with children with special needs, designated program spaces are selected and approved by Ministry of Social Services and Housing and the child follows the funding.

As a result, on top of the severely limited range of child care options available to families in British Columbia, placement procedures for children with special needs further limit opportunities for the children to attend neighbourhood/community mainstream programs. Children with special needs have fewer and less viable opportunities for interaction with their 'typical' peers and to establish important friendships and supportive networks within their own neighbourhoods.

In 1988-89, the Special Needs Day Care Program of the Ministry of Social Services and Housing contracted with 93 programs to supply 1366 designated specialized spaces, at a cost of $8.1 million, and provided subsidy authorizations for use in a variety of settings for approximately 356 children, at a cost of $2.2 million.

Projections for 1991 suggest that there will be approximately 220,000[1] children four years of age and younger in the total population. Of these children, international research shows that about 1% will be severely handicapped and an estimated 10% will have

[1] Planning and Statistics Division, Ministry of Finance and Corporate Relations, based on population projection from Statistics Canada.

identifiable mental and physical disabilities of mild or moderate severity (Wynn & Wynn, 1979).

Although the total dollar contribution to special needs day care is truly significant, the numbers of children with special needs being served is limited compared to the projected numbers of children with special needs in the province.

Eligibility for special needs day care is also determined in a significantly different manner from the typical child care program. For many children, acceptance into the program is approved only after an extensive and complicated referral and screening process.

Unlike the subsidy program for families with typical children, there is no income test for special needs child care: once accepted, families are not required to contribute to the cost of care. However, even after acceptance a family is not guaranteed access to a special needs designated space. The number of designated spaces is dependent on available funding within a limited annual budget. If a designated program is not acceptable to the family, or if all designated contract spaces are already filled on a first come/first served basis, child care is unavailable and the child is placed on a waiting list.

Because of the short duration of preschool-age special needs day care (primarily targeting children between three to five years of age), a lengthy waiting list can mean that individual children receive little or no intervention service through the special needs day care program before they enter the school system.

Designated spaces may not meet with a family's approval for a variety of reasons:

- they may create additional problems, such as transportation difficulties and cost, because the program is not located in the home community;
- the child care program's philosophy and curriculum may differ significantly from the family's approach to child rearing;
- the designated program may be designed to serve only, or primarily, children with special needs. As a result, children with special needs are severely limited in their opportunities for interaction with their 'typical' peers and in establishing important friendships and supportive networks within their own neighbourhoods and communities; and,
- the designated programs hours may not meet the family's needs for child care.

The continuing increase in the numbers and visibility of children with special needs in mainstream child care programs highlights the crisis in resource and support services to child care programs in general, and accentuates the challenge of inter-ministry collaboration and coordination of available resources and personnel. Medical science and technology are not only saving more high-risk infants but are also providing mobility to children previously confined to hospitals or home. Along with school and community programs, child care facilities are feeling the impact. There is growing concern about issues related to exceptional health care needs and legal liability.

Existing training programs for child care workers focus primarily on typical children although additional post-basic courses can be taken which address the needs of children with special needs. In order to achieve inclusive quality programming in mainstream child care programs, all child care staff should have access to basic training which equips them to effectively respond to a range of needs and to successfully integrate children with special needs into mainstream programs.

To achieve easier access to the full range of quality community-based child care options, we will need to create innovative program supports along with information-gathering and information-sharing mechanisms. It will be necessary for support services and service delivery systems to work together in a flexible partnership to achieve inclusive child care options for families with children with special needs while responding to the diverse child care needs of British Columbians.

The fundamental philosophy of the service delivery system should recognize that families are the best and most long-term committed advocates for their children with special needs. The framework for the development of an accessible, affordable, quality integrated continuum of child care options should include the "...fundamental principles of access, belonging, equity, opportunity, and inclusion..." (Guralnick, 1990).

The Task Force has identified three major priorities for achieving inclusive child care options:

1. Increasing the care options and community networks for families with children with special needs by providing family focused placements.
2. Developing a responsive, coordinated service delivery system at the community level with the mandate to forge effective parent/child care/ resource professional partnerships.
3. Expanding the basic training of child care staff to incorporate:
   a. an awareness of and sensitivity to the needs of children with special needs and their families;
   b. an understanding of the community-based support and resource network available to families; and
   c. the skills necessary to expand mainstream programming to accommodate children with special needs.

Child Care Considerations in Exceptional Circumstances

Exceptional circumstances include atypical work hours such as shifts, weekends, part-time, overtime, on-call, and seasonal work; families with an acutely ill parent; families with mildly ill children; families in crisis, and emergency child care needs.

A classic example of the impact of shift work on child care is described in the following excerpt from a nurse's letter submitted to the Task Force:

> *"The demands of shift work make the task of affordable day care a nearly impossible one especially for evening and night shift which require a sleep day in addition to hours covered for actually working. The financial burden is considerable, to say the least, and it has been my experience that many of my colleagues leave the profession because the stress and cost is too burdensome."*

These comments are echoed by hospital management who link availability of dependable child care to their ability to recruit and retain nurses.

The plight of seriously ill parents is illustrated in a paper entitled Child Care Needs of Cancer Patients and Some Policy Recommendations submitted to the Task Force by the British Columbia Cancer Agency.

> *"If a parent is too ill to care for the children, the well parent must often try to maintain a job, care for the children and household and assist the ill spouse during his or her illness. In single parent families the situation is even more critical. It is now recognized that young children are deeply affected when a parent develops cancer. Children often undergo a great deal of stress during the parent's illness and need the support of adults who can communicate with them about their fears and concerns.*
>
> *In reality, there are few special services available to cancer patients and their children. Finding care can be very difficult for those who do not have relatives and close friends to call upon. Parents are left to find child care in the context of an already over-burdened child care system that is designed for the needs of working parents, not families undergoing a medical crisis."*

Many parents have faced the challenge of finding care for a mildly ill child. In the short term, parents may use sick leave or family emergency leave, if those benefits are available to them. This is a controversial topic, raising issues such as: who should care for a sick child and in what setting; risk to other children and to the sick child, etc. Once again, this represents an exceptional circumstance, which may present considerable difficulties for some parents.

The need for, and type of, child care required in these types of situations is often unpredictable, and therefore requires flexibility depending on the nature of the crisis or emergency. An effective model would serve the needs of families experiencing a variety of crises or emergencies. Although these families are in the minority, the needs of their children for a nurturing, supportive caregiver in such situations are crucial.

Parent Involvement in Early Childhood Care Settings

In the early sixties research began to confirm the value and benefit of parental involvement in education. In 1968, the United States Department of Health, Education and Welfare established Federal Interagency Day Care Require-

ments[2] which mandated parent involvement. Specifically:

- parents must have the opportunity to become involved in the making of decisions concerning the nature and operation of the day care facility;
- parents must be provided with opportunities at a time convenient to them, to work with the program and, whenever possible, to observe their children in the day care facility; and,
- whenever an agency provides day care for 40 or more children, there must be a Policy Advisory Committee. Committee membership should include not less than 50 percent parents or parent representatives selected by the parents.

Some Canadian provinces require parental involvement in the administration of child care facilities. In Saskatchewan, Quebec and the Northwest Territories, the boards of non-profit organizations must include at least 51% parent members and Quebec and Northwest Territories require that commercial programs and family day cares have a parent committee and parent activities. In New Brunswick 25% of the board members of a non-profit society deliverying child care must be parents and in Manitoba the requirement is 20%.

The evidence continues to grow in support of parent involvement in early childhood programs as the bibliographies prepared by Henderson[3] in 1981 and 1988, which cite 53 studies, indicate. In Right from the Start, a research based policy statement published in 1988 by the National Association of State Boards[4], it is suggested that parental involvement promotes an environment in which parents are valued as the primary influence in their children's lives and in which they are essential partners. It also has the ability to enhance the self-esteem of parents which is integral to the short and long-term development of the child.

Parent involvement takes many forms and may range from token involvement, such as having a guest speaker on child rearing issues twice a year, to program control where parents are directly involved with policy decisions and hiring of caregivers. Whatever the level of involvement it should enhance the caregiver-family relationship and increase the opportunities for communication, not only about the program but also at the personal level. Working together, parents and staff can provide the very best for young children.

Community-Based Delivery - The Best Way to Provide a Continuum of Care

The two key themes emerging from the issues outlined above are:

- the need for integrated, inclusive child care; and,
- the need for flexible approaches capable of quickly adapting to changing needs.

The lack of an appropriate planning, development and administrative infrastructure at the community level presents one of the biggest challenges to meeting these needs.

Child care development, to date, has been adhoc with an almost total dependence on voluntary initiatives. In spite of the major contributions made by parents and community-members, resulting service development has not reflected areas of highest need, services suffer from long-term administrative instability and the ability of communities to make use of new resources is limited.

Effective development of services must occur in a community-based context that enables maximum use and coordination of existing resources and the capacity to identify needs and plan for additional resources. Ongoing administrative and program support is required to ensure viability and quality. Further, parents, caregivers, service providers and the community need easily accessible and consistent information, referral and support services.

The principles outlined in the Advisory Council Report for Community-Based Programs for Women are equally applicable to the delivery of child care. Specifically...

2 United States Department of Health, Education and Welfare, Federal Interagency Day Care Requirements. Washington, D.C., September, 1968.

3 Henderson, A., The Evidence Continues to Grow, National Committee for Citizens in Education, 1987.

4 National Association of State Boards of Education, Task Force on Early Childhood Education, Right from the Start, 1988.

- that the community is the best judge of its needs and that no two communities are exactly alike;
- that, in most cases, community-based organizations are the best equipped to deliver services in their community;
- that the delivery system developed must not be obtrusive and must respect existing planning and delivery mechanisms, and build on the resources already available through coordination, service needs assessment and service enhancement; and
- that the role of governments and other funding sources is to work with communities to ensure a coordinated response to their needs.

However, the Task Force is very concerned that responsibilities not be handed over to communities without adequate community development support to build appropriate structures and without adequate ongoing resources and expertise to maintain the capacity to respond to community needs.

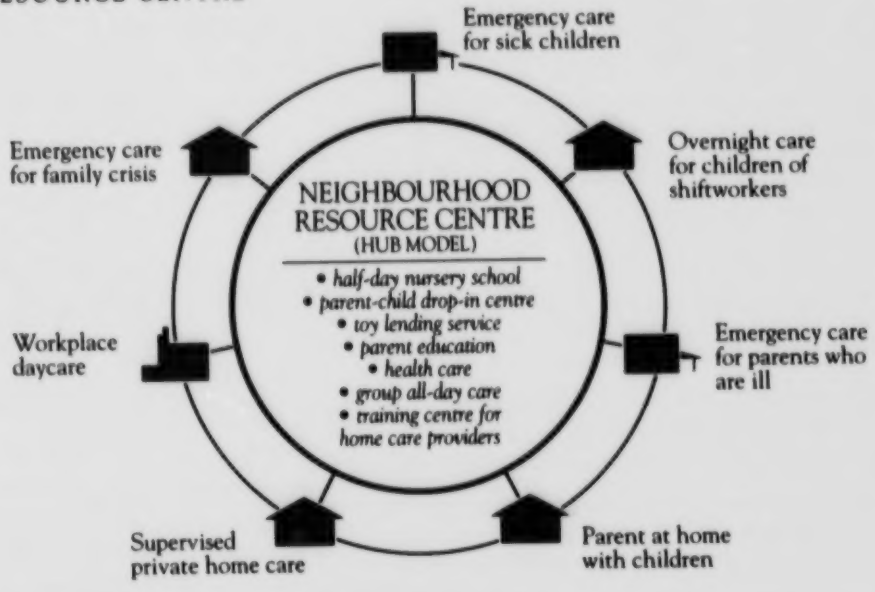
The Task Force supports the development of community-based child care planning structures that can identify need, plan, coordinate, develop and deliver services consistent with community needs and priorities. With adequate assistance, such structures can be responsible for ensuring that their communities have both the necessary direct services and related information, referral and resource services to make "one-stop shopping" a reality for parents and caregivers.

The Task Force explored some innovative delivery models which have the capacity to incorporate a broad spectrum of community needs. One such model is a "neighbourhood hub centre" (see Figure 2). In this model, a local resource centre is established which oversees and supports a variety of child care options, including group care, supported family day homes, toy lending libraries, and parent resource centres related to local community needs. The centre may also fulfill the following functions: information and referral; networking, coordination and planning; serving as a development vehicle for new child care services; establishing indicators of quality; accrediting caregivers; and advocating on child care issues. Another model which was discussed was the "full-service school" model (see Figure 3) which was recommended by the Early Childhood Working

Figure 2
THE NEIGHBOURHOOD RESOURCE CENTRE

Hub Model

To develop a well co-ordinated system of community-based care, governments should encourage the development of neighbourhood resource centres (hub models) in larger municipalities. Through this structure, a wide variety of program types could be delivered and made accessible.


Emergency care for sick children
Overnight care for children of shiftworkers
Emergency care for parents who are ill
Parent at home with children
Supervised private home care
Workplace daycare
Emergency care for family crisis
NEIGHBOURHOOD RESOURCE CENTRE
(HUB MODEL)
• half-day nursery school
• parent-child drop-in centre
• toy lending service
• parent education
• health care
• group all-day care
• training centre for home care providers

Group of the Sullivan Royal Commission on Education. This model bases a range of early childhood, child care and family support programs out of the neighbourhood school.

The Task Force also had representatives from some existing provincial organizations that currently offer support services to the child care community and provide models that should be explored. Westcoast Child Care Umbrella Resource and Support Society is a Vancouver-based organization that houses and provides support to five of the key provincial early childhood education organizations. Westcoast also provides a resource centre to support the field and provides services and sponsors projects to assist parents and caregivers.

Family day care support agencies were also represented on the Task Force. These organizations, some long-standing and some new, provide support to family day care homes. In some communities, these organizations also take on other support functions including information and referral services to parents.

Agency support enhances quality in family day care. Licensing sets minimum standards for those caring for more than two children but support and monitoring by an agency or program enhances quality in both licensed and informal family day care.

Family day care support agencies and programs are in their infancy in British Columbia with only four such services in effect prior to 1990. With the expansion of the Day Care Support Program there are now 30 services. The current Day Care Support Program serves four basic functions: to recruit, train, support family and home-based caregivers, and provide information and referral services to parents.

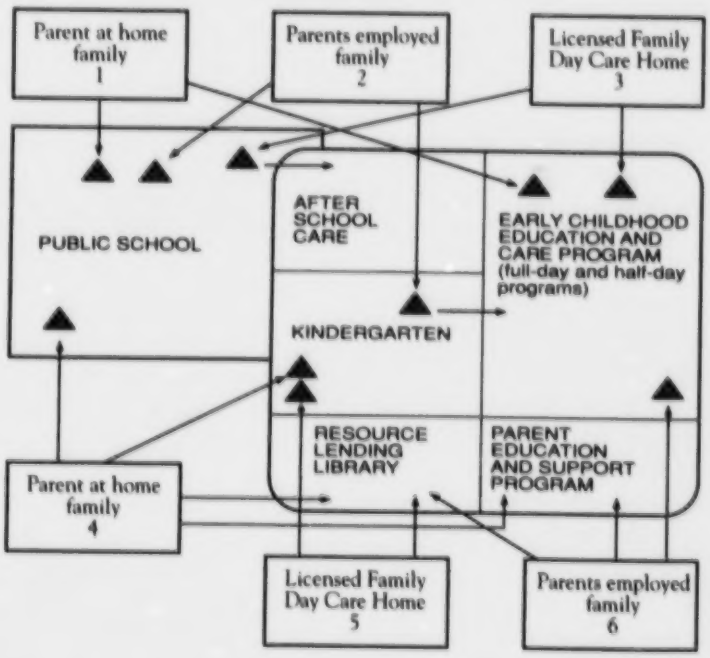
Agencies recruit caregivers who have good child care skills, as well as experience in parenting. For many caregivers, providing family day care supports their desire to remain at home with their own children. Caregivers bring a wide range of additional backgrounds including some with professional skills in working with young children. The agency attracts caregivers to the program by providing benefits such as insurance, book and toy loan, referrals of children, and training and support, requiring in return a standard of quality care.

Screening of caregivers is essential since caregivers are working in their own homes and cannot be constantly supervised. Standard screening

Figure 3

THE FULL SERVICE SCHOOL MODEL

1. Has children >6 in school and child <5 in half-day preschool program.
2. Has child >6 in school who attends after-school and kindergarten child who attends day care program half day.
3. Family day care provider who cares for school-age child and cares for children <5 who attend preschool half-day.
4. Has children >6 in school and children <5 who attend preschool half-day; parent uses resource library and attends parent education.
5. Family day care provider who cares for kindergarten age child and children <5; provides e.c.e. program; uses resource library.
6. Has children <5 who attend day care program full-time; parent uses resource library and attends parent education courses in evening.


Parent at home family 1
Parents employed family 2
Licensed Family Day Care Home 3
PUBLIC SCHOOL
AFTER SCHOOL CARE
EARLY CHILDHOOD EDUCATION AND CARE PROGRAM (full-day and half-day programs)
KINDERGARTEN
RESOURCE LENDING LIBRARY
PARENT EDUCATION AND SUPPORT PROGRAM
Parent at home family 4
Licensed Family Day Care Home 5
Parents employed family 6

processes should include a caregiver interview, a doctor's reference, two character references, a criminal record check and a home safety assessment. This screening should be provided for informal caregivers since licenced caregivers have already been assessed by the Licensing Board. Monitoring is important in family day care and can best be accomplished through regular home visits by agency staff and parent evaluation through the referral process.

Training of family caregivers with respect to provision of services in a home-based setting should be encouraged and can include courses, workshops, newsletters, and consultation during home visits. Caregivers are encouraged to support the individual child's development by providing stimulating play activities. Programming in family day care includes a flexible daily routine that draws upon day to day family activities such as cooking, story time, field trips to the grocery store or walks to the park.

Because agencies or programs have to be visible to the public in order to attract caregivers and parents to their service, they are in a position to provide public education regarding quality care in family day care.

While it is not appropriate for the Task Force to prescribe the particular structure that will work in each community, we envision the development of integrated child care resource boards or the explicit expansion of the mandate of an existing community organization to fill this need. Regardless of the particular organizational form, the development of community-based structures should reflect the following principles:

- child care coordinating bodies should complement, not duplicate, existing organizations;
- such bodies need to be developed in a consistent way across the province, so that all geographic areas are served and should correspond with an appropriate existing service area such as regional district, municipalities, school districts or health units;
- the decision-making level of these bodies should have majority representation from parents of children using services, appointed representatives from related bodies including municipal and regional district councils, school boards, boards of health, etc., and non-voting representatives from relevant ministries; and,
- each community/region should be represented at the provincial level as part of the newly created child care authority.

Resource Implications

The ability to deliver community-based child care resources will require staff and financial support. Not only will funding need to be made available at the community level to stimulate development of innovative delivery models, but the lead ministry, in conjunction with the newly created child care authority, will need to allocate staff resources to work with communities to build appropriate community structures. Ongoing staff support, expertise and funding will be required to maintain these resources. Funding also needs to be directed at developing specific innovative programs such as: mobile care for rural and isolated children; care for shift-workers; emergency care; respite care; care for mildly-ill children; and hospital-based care for both shift-work staff and children whose parents are hospitalized. The Task Force envisions that communities, once they have identified needs, will have a range of funding programs which they can access in order to implement their plans.

There are existing funding programs which the Task Force reviewed which can provide models for new child care related programs. Ontario has developed two programs which address these needs; the Flexible Services Development Project and the Child Care Program Development Fund. The experience in British Columbia with the Healthy Communities Programs and the recently announced Community Initiatives for Women offer current examples of funding models that are intended to stimulate community identification of need and approaches to meeting those needs.

RECOMMENDATIONS

THE TASK FORCE RECOMMENDS THAT:

1. the provincial government, under the auspices of the proposed child care authority, initiate a process to develop community-based child care development boards to plan, coordinate, develop and deliver services which reflect community strengths, needs and priorities;

2. such boards should complement, not duplicate, existing community organizations;

3. through such boards, the following community-based resources and supports be developed as needed:

   - administration, financial management and board development for non-profit societies;
   - information, resource and referral services for parents, child care providers, employers and others in the community;
   - information and resources for development and start-up of new child care programs;
   - agency support to informal and licensed family day care programs;
   - consultation, and where appropriate, therapeutic services to support child care programs to integrate children with special needs; and,
   - support and resources to assist programs in responding to children's and families' cultural diversity.

4. the proposed child care authority or, until it is established, Women's Programs initiate pilot projects to develop innovative responses to exceptional care needs, with priority given to rural child care delivery and non-traditional and extended hours of work;

5. the proposed child care authority or, until it is established, Women's Programs initiate pilot projects to develop aboriginal "owned and controlled" child care programs which are culturally appropriate and reflect the diverse cultural values of the aboriginal communities;

6. the proposed child care authority or, until it is established, Women's Programs establish an aboriginal working committee on child care, responsible for presenting specific recommendations to ensure the ongoing development of community-based quality child care reflecting aboriginal values based on the guiding principles outlined above and including the current aboriginal achievements in the child care field;

7. the proposed child care authority gives high priority to reviewing and developing administrative models for delivering family day care support services to licensed and informal family day care homes;

8. the Ministry of Social Services and Housing broaden the terms of reference of the Special Needs Program review to expand the members to include parents, self-help and community service agencies and child care workers; and,

9. the Ministry of Advanced Education, Training and Technology revise the early childhood education basic curricula to integrate introductory components on infants, toddlers and children with special needs as an integral part of basic training.

IX. FINANCING AND FUNDING MECHANISMS

The creation of affordable, accessible, quality child care is directly dependent on the mix and sufficiency of funding available to support the system.

CURRENT FINANCING AND FUNDING MECHANISMS IN BRITISH COLUMBIA

The current mix of funding/financing mechanisms can be organized in five categories: parent contributions; provincial programs; federal contributions; municipal and sponsoring agency contributions; and fund-raising initiatives undertaken by non-profit child care organizations.

- **Parent contributions include:**
  - parent fees paid for alternate care; and,
  - volunteer activities of parents in direct operations.
- **Provincial programs include:**
  - subsidies paid to eligible parents to assist with the cost of purchasing alternate care;
  - additional funding to day care providers caring for children with special needs;
  - a day care support program to recruit, train and support day care providers and in-home care providers, and to provide a referral and support service to parents;
  - relocation/repair grants of up to $5,000 available to non-profit child care societies to assist with relocation, upgrading or equipment costs to comply with licensing requirements;
  - matching start-up grants of up to $10,000, available to non-profit societies to assist with the costs of equipping and furnishing new child care facilities; and,
  - lottery funds available to assist with the capital costs of establishing a new child care facility, on a matching basis of the non-profit contributing 2/3 and 1/3 provided by lotteries.
- **Federal contributions include:**
  - all families with dependent children are eligible for basic tax credits which reduce tax payable; a refundable child tax credit is available to low income families;
  - Under the Canada Assistance Plan the province recovers up to 50% of expenditures on subsidies, special needs day care and day care support and grants for non-profit and regulated family day care;
  - the Child Care Initiatives Fund is available to non-profit societies and employers to test new, innovative child care programs; however, it does not provide financial support for the acquisition of land, or the purchase, construction or renovation of buildings;
  - two-earner families are eligible for child care deductions that reduce taxable income;
  - single-earner families are eligible for married tax credit for supported spouse; and,
  - single parents are allowed to deduct first child as equivalent to spouse.
- **Municipal and sponsoring agencies' contributions include:**
  - grants to non-profit societies;
  - use of land and buildings for minimal costs; and,

- reduction of municipal taxes.

It should be noted that the availability of these types of support is inconsistent across the province.

◆ **Fund-raising initiatives undertaken by non-profit organizations include:**

- grants from philanthropic organizations;
- volunteer activities undertaken by caregivers;
- fund-raising through licensed gambling;
- acting as sales agents on a commission basis; and,
- specific events such as bake sales, bottle drives, etc.

Detailed information describing major funding vehicles is found in Appendix C.

IMPACT OF CURRENT FUNDING MIX

Child care in British Columbia is predominantly funded by parent contributions. It is conservatively estimated that approximately $350 million is spent annually on child care in this province. (For more detailed discussion see Section XIII - The Social and Economic Benefits of Providing Quality Child Care.)

The province's contribution to child care is outlined in the following table.

TABLE 8:
PROVINCIAL FUNDING OF CHILD CARE

	89/90 EXPENDITURES (MILLIONS$$)	90/91 BUDGET (MILLIONS$$)
Ministry of Social Services and Housing		
Subsidy	37.9	44.2
Special Needs	13.1	14.1
Day Care Support	.29	2.0
Day Care Grants	.39	.50
Provincial Secretary		
Capital Funding through Lotteries		.74*
TOTAL	**$51.68**	**$61.54**

* Expenditures since July 1989; Lottery expenditures are not budgetted

In addition to these direct funding mechanisms, child care is also supported through provincial dollars provided to post-secondary institutions for delivery of early childhood education and through government employees involved in licensing and administration of subsidy programs. It is difficult to determine these costs, as licensing officers and financial assistance workers have other responsibilities in addition to those related to child care.

It is estimated that in 1990/91 the total provincial contribution to the cost of child care will represent 18% of the anticipated $350 million spent on child care in British Columbia. Of the total $61.5 million that the province has budgeted for child care in 1990/91 only 5% is dedicated to supporting a delivery system through expenditures for the Daycare Support Program, Daycare Grants Program, and Lottery Grants. As the following table illustrates, the majority of other Canadian provinces have recognized the fragility of the delivery system by choosing to spend a higher proportion of their child care budgets on its support. This table excludes provincial administrative costs and the costs of educating providers.

TABLE 9:
COMPARISONS OF PROVINCIAL EXPENDITURES ON CHILD CARE – 1988/89

PROVINCE	ON FAMILIES Subsidy and Special Needs	ON FACILITIES Capital, Operating & Other Grants	TOTAL	% (PERCENTAGE) SPENT ON FACILITIES
B.C.	$38.2m	$.4	$38.6	1%[1]
Alberta	26.3	32.3	58.6	55%
Sask.	15.7	2.1	17.8	12%
Manitoba	15.8	15.0	30.8	49%
Ontario	210.0	76.0	286.0	27%
Quebec	50.9	63.8	114.7	56%[2]
N.B.	2.1	.5	2.6	20%
N.S.	6.6	.4	7.0	6%[3]
P.E.I.	1.2	.3	1.5	22%
NFLD.	1.9	.1	2.0	5%
N.W.T.	1.2	.8	2.0	40%
Yukon	n/a			

Notes:

1 1990/91 estimates of British Columbia expenditure to support the infrastructure are $3.24m, a significant increase over 1988/89. It will increase support to infrastructure to 5% of the budget.

2 Quebec based on 1989/90 expenditures.

3 Nova Scotia has instituted operating grant and salary enhancement grants since 1988/89.

With the exception of Alberta and Quebec, child care subsidy to low income families and assistance for children with special needs make up the largest part of all provincial expenditures. In British Columbia, approximately 42% of the budgeted expenditures, which will total $58.3 million in 1990/91, are cost-shareable with the federal government under the Canada Assistance Plan (CAP) and the province can expect to recover approximately $24.5 million. Under the welfare services provisions of CAP, the federal government will cost share 50% of the expenditures on services that are provided by the province or a non-profit organization. As British Columbia, unlike other provinces, extends the availability of subsidy to parents who choose to use commercial programs, cost recovery is lowered to 42%. Other provinces offer subsidy only to licensed non-profit facilities to maximize the federal portion of the expenditure.

IMPACTS OF DIFFERENT TYPES OF FUNDING MECHANISMS

There are three major child care funding mechanisms used across Canada. They are: user subsidies for low income families; operating grants which go to programs in a variety of forms; and capital funding for new or expanding facilities or facilities with capital expenditures for repair or renovation. As noted in the table above, provinces differ significantly in the emphasis they place on these different funding mechanisms. In British Columbia, the overwhelming emphasis is on the parental subsidy program.

User Subsidies:

> **"Subsidy allotments are far below the current cost of child care which...increases the financial burden on parents and often forces them to seek illegal child care options, which may prove unsatisfactory."**
>
> *(Submission from parent in Burnaby)*

User subsidies are targeted to families below a certain income level to assist them to either enter or maintain their position in the labour market. In British Columbia and some other provinces a portable subsidy or voucher is provided to the family and the choice of where to spend it is theirs. In other provinces, subsidized families may only use designated spaces which have been allocated to specific centers or family day homes.

The amount of funding budgeted for subsidies in British Columbia has increased 116% over the past four years (86/87 to 90/91). Over the same period, actual subsidy rates have increased, depending on the type of care: by 36% in the case of group day care for 3 - 5 year olds; by 70% in the case of family day care for children 0 - 18 months.

This substantial increase in expenditures does not appear to have had a significant influence on expansion of spaces. It is therefore questionable whether subsidy rate and subsidy budget increases alone will have the desired result of expanding spaces.

Table 3 in Appendix D, entitled "Overview of Provincial and Territorial Child Care Subsidies", shows that the net income levels and the maximum allowable subsidy vary considerably from province to province. Most of the provincial income levels are considerably lower than those allowed under the federal "likelihood of need" guidelines for CAP. The following table shows the current British Columbia net income level (by family size) that a family can reach to receive maximum subsidy for their child care costs. These base amounts may be increased by $125 if a family member is disabled or over 65, and by $300 when an adult family member is either employed or a student. Subsidies are not available to families where both parents are full-time students regardless of their income level.

TABLE 10:
SUBSIDY ELIGIBILITY LEVELS

FAMILY UNIT SIZE	NET MONTHLY INCOME LEVELS		TURNING POINT FOR WORKING/ STUDENT PARENTS		TOTAL NET INCOME FOR FULL SUBSIDY
2	$ 987	+	$ 300	=	$ 1,287
3	1,133	+	300	=	1,433
4	1,244	+	300	=	1,544
5	1,365	+	300	=	1,665

Maximum subsidies are reduced by 50 cents for every dollar that eligible families' incomes exceed the total net monthly income levels.

The current federal "likelihood of need" income levels under the Canada Assistance Plan are illustrated in the following table.

TABLE 11:
LIKELIHOOD OF NEED MONTHLY INCOME LEVELS UNDER THE CANADA ASSISTANCE PLAN BY FAMILY SIZE OCTOBER - DECEMBER 1990

(subject to quarterly adjustments to GIS and OAS levels)

FAMILY SIZE	TURNING POINT	FAMILY SIZE	TURNING POINT
2	$ 2,374	4	$ 3,166
3	2,770	5	3,561

*Refers to net income. Families below the turning point would be eligible for full subsidy. Those above the turning point would be expected to contribute 50 percent of any income above the turning point to their child care costs, thus reducing the subsidy.

Affordability is a serious problem for many families and raising the eligibility levels would provide more low income families with assistance with their child care costs. Alone however, it would have little if any impact on the creation of more quality child care spaces in British Columbia.

Raising subsidy rates is also unlikely to stimulate supply but higher rates might have an affect on accessibility for these families and improve quality.

Current subsidy rates, noted in the following table, do not in most cases reflect the actual cost of care. Subsidized parents must either pay the difference between the subsidy level and the fee charged or the child care facility must absorb the cost of providing care to subsidized families through: low staff salaries; charging higher rates for non-subsidized families; or aggressive fundraising activities. Because subsidy levels are low and because providers must bill the Ministry of Social Services and Housing for their services and receive payment weeks after the service has been rendered, subsidized families are sometimes overlooked on waiting lists in favour of fee paying parents. This is a critical issue as these families typically have fewer resources to draw on and the availability of quality child care can provide a critical support to healthy family development.

Raising the subsidy rate to reflect market conditions or actual cost of care would put the subsidized family in a more equitable position in relationship to fee paying parents. It might also result in better salaries for child care workers, which in turn might reduce the turnover rate, a known factor contributing to poor quality. Adjusting both subsidy and eligibility levels will result in more low income families being able to access and afford quality child care options but little impact would be felt in the delivery system.

Operating Grants:

> **"One of the overwhelming barriers to people choosing to enter...the whole field of child care is the low income for such employment. Decent salaries...are a basic requirement for stability, high quality and expansion of family day care."**
>
> *(Submission from The Western Canada Family Day Care Association of B.C.)*

TABLE 12
SUBSIDY RATES FOR CHILD CARE FACILITIES

TYPE OF CARE		4 HOURS OR LESS DAILY PER DAY	4 HOURS OR LESS DAILY PER MONTH	MORE THAN 4 HOURS DAILY PER DAY	MORE THAN 4 HOURS DAILY PER MONTH
F1-Family	(0-18 Mo.)	$9.10	$182.00	$18.20	$364.00
F2-Family	(19-36 Mo.)	7.80	156.00	15.60	312.00
F3-Family	(3-5 Yrs.)	6.50	130.00	13.00	260.00
G1-Group	(0-18 Mo.)	11.95	239.00	23.90	478.00
G2-Group	(19-36 Mo.)	10.80	216.00	21.60	432.00
G3-Group	(3-4 Yrs.)	7.80	156.00	15.60	312.00
Out-of-School					
L1-Kindergarten*		8.95	179.00	11.20	224.00
L2-Grade 1 & up*		6.50	130.00	7.55	151.00
N1 Nursury School (up to 4.0 hours per day)		4.70	94.00		

NOTES:
*F3 or G3 rates apply for attendance during days of school closure, illness, or irregular days of care given totally outside school hours.

Rates effective September 1, 1990

All provinces and territories except British Columbia provide recurring direct operating grants to child care facilities. The purpose of operating grants is to do one or all of the following: to improve wages and working conditions; to improve quality of service; to maintain facilities and equipment; to stem the escalation of the fee charged to parents. Appendix D, Table 2, lists the types of operating support offered by each province and their cost. Operating grants come in various forms.

Alberta introduced operating grants in 1980 "...to encourage operators to meet new regulations for staff/child ratio and floor space requirements". Alberta (and a number of other provinces) decreases the value of the operating grant as the age of the child increases, recognizing that care for infants and toddlers is most costly to provide.

In Manitoba, the government contributes to salaries through Salary Enhancement Grants and to overall operating costs through Maintenance Grants. The recent Manitoba Child Care Task Force recommended increasing the level of both these grants as they were deemed to be an effective determinant of quality. Manitoba also provides an annual Audit Grant to centres and encourages both centres and family day care homes to provide infant care by offering a supplementary per diem per infant.

The first priority of the Direct Operating Grants, introduced in Ontario in January 1988, was to improve salaries and benefits for child care staff. An evaluation of the first year of the program indicated that salaries in non-profit centres increased 18%. Eighty-five percent of the public expenditure went to augment salaries while 15% was used for non-salary purposes.

In Quebec, direct subsidies to programs are made to "...ensure their financial stability". Because of the strong principle of parent involvement in Quebec policy, only centres managed by parents or home day care agencies are eligible for funding. Quebec provides two forms of ongoing support: per diem Operating Grants (for salaries, materials and administration) and annual Housing Grants (for heat, power, rent or mortgage). In their 1988 Policy Statement on Day Care Services, the government of Quebec gave notice that it intends to replace the per diem system of operating grants with a simple formula. The proportion of government assistance will be set at 45% of day care revenue. Therefore, for each $1.00 collected through fees, the government will provide $.45.

In 1990, New Brunswick chose to collapse two grants, the Flat Rate Grant and the Equipment Grant, into a single new Operating Grant.

Prince Edward Island started its Direct Funding Program in 1987 stating that its purpose "...is to provide licensed child care facilities with financial support in order to enhance and maintain the quality of the program being offered..." and that funds be focused on salaries and training and program resources.

If the government of British Columbia were to institute an operating grant program to support non-profit programs, a substantial commitment of funds would be required. In addition, as new licensed spaces are created, the budget for Operating Grants would have to be increased. Critics of the direct operating grant express concern that public dollars should not be used to subsidize spaces filled by children of middle and high-income parents. This argument can be countered. Without operating grants to stabilize the system, some facilities, in an effort to pay reasonable wages and maintain safe, healthy and challenging environments, will raise their fees until they are out of the reach of low-income families entirely. The result will be the ghettoization of children: high quality programs with well-qualified staff and good equipment accessible to those who can afford them and programs with low wages, higher staff turnover, and substandard surroundings for those who cannot. Children should be able to access quality programs that support and enhance parental care regardless of their economic circumstances.

Under the Canada Assistance Plan, operating grants paid to non-profit programs are cost shareable. Provinces may claim for 50% of the cost of those spaces occupied by children whose families fall within the federal "likelihood of need" guidelines. In a couple of instances, operating grants in other provinces and territories apply only to the subsidized spaces provided by a facility. This creates reverse discrimination. The majority of the grants are offered across the board.

Operating grants are an effective means of stabilizing existing child care services. The stability they bring to wages and working conditions appears to reduce turnover and facilitate recruitment of staff, thus enhancing the quality of care. The stability they bring to the financial viability of the operation encourages existing organizations to develop more child care spaces and new organizations to accept the risk. The growth of child care services, particularly in Alberta, Manitoba, Ontario and Quebec attests to this. Operating grants are the only way to make infant and toddler group care affordable to all families.

Capital Funding and Start-up Grants:

> **"To encourage new child care services, funds must be made available to assist with the development of new facilities and to purchase equipment."**
>
> *(Submission from the Women's Resource Centre, Cranbrook, B.C.)*

Provision of capital grants tied to the creation of new spaces is the most effective way of creating spaces. Benefits associated with a capital grants program include benefits to the economy through creation of jobs, purchase of goods and services and increased availability of child care spaces which allow more people to work and contribute taxes.

Capital grant programs are also attractive in that they represent an accountable one-time cost with a clear definition of what will be purchased. However, ongoing operating support is essential to operational viability over the long term. Capital grant programs are often under-subscribed if ongoing operating support is inadequate.

The existing capital funding available through provincial lottery grants has not proven to be a highly effective means of increasing child care spaces. Since its introduction in 1989, the program has granted $740,095 (to September 1990) resulting in the creation of 286 new spaces and the enhancement or preservation of 927 existing spaces.

Access to the funds are dependent on the non-profit society raising 2/3 of the capital in advance; a difficult task for even the most organized volunteer board.

If the rules around the use of Lottery Funds could be changed (so that non-profits could apply for the fund before they start a capital fund drive in their community and could therefore use the promise of the Lottery funds as "seed" money) the take up and subsequent growth in spaces might improve. It is also suggested that, because of the huge burden of trying to raise 2/3 of the money, consideration should be given to reversing the ratio of lottery/community funds.

There seems to be confusion at the community level regarding how Lottery Grants are accessed, what they can be used for and what the application and evaluation criteria are. There is also a perception that the application from a child care society must compete for lottery funds with a wide variety of applications for other purposes, such as skating rinks and cultural activities.

There is no predetermined allotment set aside to meet specific expansion objectives. This too should be reviewed if Lottery Funds are to be an effective source of funding to create new child care spaces in British Columbia.

Start-up grants are available from the Ministry of Social Services and Housing to assist with the costs of equipping and furnishing new day care facilities. Again, access to the funds is dependent on the non-profit society raising matching funds which poses a barrier for the voluntary sector. If the goal is to stimulate the growth of child care spaces the effectiveness of these two existing funding mechanisms should be reviewed. Further, the total maximum grant available ($10,000) is insufficient to meet the needs of large programs.

Federal cost-sharing is not available for capital costs under the Canada Assistance Plan. The cost-sharing program proposed by the federal government three years ago under the abandoned National Child Care Strategy included a proposed 75% federal/25% provincial cost-sharing of capital grants. To avoid erosion of the existing supply of spaces, any capital grants program will have to address the means of stabilizing the existing facilities. Otherwise, facilities requiring repairs and renovations may be inclined to apply for capital funding to create new spaces, and then shut down the original facility.

The capital funding and start-up grants available

in other parts of Canada are listed in Appendix G, Table I. Alberta, New Brunswick and Prince Edward Island do not offer any funding incentives for the development of new child care spaces. Ontario, Quebec and the Yukon are the only provinces or territories that offer major capital funding. The Ontario and Quebec programs are described briefly below. The remaining regions of Canada supply start-up grants ranging from $100/space to $600/space.

Ontario has established an effective Program Development Fund which has increased the number of licensed child care spaces in that province by approximately 115,000; an increase of over 30% in three years. The categories for funding within the program are: Services to Families (group centre care, private home day care agencies, and child care resource centres); Special Projects (public education, community development and special resource projects); and Pilot Projects. The province will supply up to 80% of the capital funds necessary. In exceptional cases, 100% funding will be supplied. Non-profit agencies are expected to raise 20% from the community. Start-up funds, to cover a portion of the initial operating costs, such as supervisor's salary prior to opening and necessary equipment, supplement the capital funds. The inclusion of Pilot Projects in this funding mechanism stimulates innovative responses to atypical needs such as: care for the children of those who work irregular hours or shifts; emergency care; and rural and/or isolated care. Ontario also targeted money at the renovation of vacant schools and requires that any new school built in the province provide school-based child care spaces.

Quebec supplies funds to assist with the establishment of group programs and family day care agencies. Centres may apply for a project management grant of $5,000, up to $50,000 in capital per project and $100/space in start-up funds. As with their operating grants, these funds are only available to centres managed by parents. A $5,000 per project start-up grant is available to agencies wishing to coordinate home day care providers.

Short term loans available through the Rural Incentive Loan Program are available to operators wishing to supply programs to rural areas of Newfoundland.

The concept of business loans targeted to expanding child care operations does not appear to have been pursued in British Columbia. Currently, the Ministry of Regional and Economic Development provides loan guarantees to small businesses that typically have experienced difficulty in accessing traditional funding sources. Consideration could be given to developing a loan program (e.g.: loan guarantees, low interest loans, forgivable loans) tailored to the needs of commercial child care operators.

The current funding mix has not been effective if the goals are to stimulate both immediate and ongoing expansion of child care; to subsidize low income working families so that their children can benefit from the advantages of quality child care; and to stabilize the existing system so that providers accept the risk of developing new services, particularly those for infant, toddler and school-aged care which are in greatest need.

PRINCIPLES

The following principles should be used to determine the most appropriate means and mix of funding:

- all children, regardless of economic background, are entitled to quality child care;
- funding should be targeted to sustaining and increasing quality child care;
- the need for funding should be planned for and driven from the community level;
- funding should be targeted to meeting explicit expansion priorities;
- the role of government is to ensure adequacy, affordability and sustainability of the supply of quality child care and to ensure that low-income families have access to quality care;
- the cost of quality child care is shared between parents and government; and,
- government funding should be targeted to the most cost-effective means of delivering a quality child care program and should result in the accountable expenditure of public funds.

FUNDING STRATEGY

A successful funding strategy will need to address the means of stimulating creation of a variety of different models of child care, from family day care to group care which respond to a range of child care needs from infant care to school-age care.

The availability of quality group child care is directly related to the availability of qualified child care staff. Studies indicate higher quality child care programs spend more money per child, a significant proportion of which is translated into staffing costs (Olenick, 1986). In order to increase spaces and ensure quality, we must first stabilize the existing operations by addressing staff recruitment and turnover. Once that situation has begun to stabilize, attention should be directed to creating new spaces.

A sufficient supply of quality family day care requires a variety of supports to family day care providers in areas such as training, and access to information, insurance, benefits and resources. Priority should be given to reviewing and implementing appropriate models of agency-supported licensed and informal family day care, as now exists in many provinces. Once established and adequately funded, these agencies can become the vehicle for delivering grants, support and monitoring to family day care. The current day care support program is a first step, but its narrow focus lacks the capacity and resources to develop agencies with a range of other responsibilities.

The following funding proposals are aimed at:

- stabilizing and improving existing services;
- providing on-going financial viability for existing and new services;
- maximizing affordability of quality services;
- providing a short-term infusion of funds to create new spaces relatively quickly;
- maximizing the use of existing publicly funded services and facilities; and,
- providing for community-based support services.

Toward these ends, several possible funding programs have been included, each of which is targeted to address a particular need or support a particular choice.

The Task Force recognizes the important role played by many private owner-operated programs in the province. As part of our objective of stabilizing existing services, specific parts of our funding strategy recommend that funds be made available to existing owner-operator programs and that support be given to caregivers working in these settings. However, in general, the Task Force sees the growth of a provincially supported child care system under non-profit auspices - both center-based and agency supported family day care homes - for two key reasons:

- **Maximizing cost-sharing under the Canada Assistance Plan**

  Provincial support to non-profit organizations is eligible for cost-sharing under the Canada Assistance Plan. To maximize the return available to the province, funds should be targeted to these organizations.

- **Accountability of Public Dollars**

  Expenditures of public funds must be accountable and open to public scrutiny. The Societies Act, with respect to the administration of non-profit societies, requires that all funds be directed to the services of the organization, not to the private holdings of any individual or business. Further, societies are required by the Act to maintain and submit financial records for public review on an annual basis.

One drawback to a multi-tiered funding strategy is the potential for an overly complicated set of funding programs. This can be alleviated by a one-stop information/resource service at the local level and efficient coordination in the 'lead agency'.

Another option is to consider the proposal from the Ontario Coalition for Better Daycare, which suggests non-profit child care programs be provincially funded like other child welfare programs, and that the provincial government be responsible for recovering costs from parents. The Task Force has not had time to fully consider this approach, but its administrative simplicity is attractive. It would be worthwhile to cost it out and compare it to other funding options. (See Appendix E for a more detailed description.)

RECOMMENDATIONS

THE TASK FORCE ON CHILD CARE RECOMMENDS:

1. an immediate introduction of a significant increase in the existing daycare subsidy rates to more accurately reflect the cost of care. A preliminary assessment by the Task Force recommends the following percentage increases:

   - 30 - 35% for children 0 to 3 years;
   - 25 - 30% for children 3 to 5 years; and,
   - 10 - 15% for school-aged children;

2. an immediate increase in the income exemption level toward the maximum allowable under federal cost-sharing regulations;

3. an immediate implementation of direct operating grants for existing centre-based infant and toddler programs and new non-profit infant and toddler programs;

4. enriched capital funding be provided to non-profit societies for construction, renovation and purchase of child care facilities; and,

5. development of appropriate capital funding programs to support the implementation of a continuum of care options outlined in Section VIII - Community-Based Delivery.

The following recommendations cover a range of financial considerations which must be addressed. Communities should be able to access an appropriate mix of funds to meet their particular needs.

Operating:

Funding to cover operating costs should be targeted to stabilizing existing services and ensuring the quality of new child care services.

THE TASK FORCE RECOMMENDS THAT:

6. the provincial government introduce salary enhancement grants to raise staff salaries to a level which reflects training and responsibility. That the proposed child care authority give top priority to developing appropriate mechanisms for an accountable delivery system including the question of eligibility of existing owner-operators and family care providers.

Capital:

Capital funding initiatives should be introduced to stimulate both immediate and ongoing expansion of child care.

THE TASK FORCE RECOMMENDS THAT:

7. the proposed child care authority or, until it is established, Women's Programs establish a target and appropriate capital funding for the expansion of spaces over the next three years;

8. funds be made available to relevant ministries for construction, renovation, retrofitting and occupancy costs of child care facilities in new and existing buildings used by provincially funded services, (e.g., schools, colleges, and hospitals) and that the development of on-site child care in school settings be established as a priority;

9. to meet immediate or emergency needs, adequate funds be set aside for a three year period to purchase and place modular prefabricated units to be operated by non-profit societies and maintained and managed by British Columbia Buildings Corporation;

10. the provincial government provide an annual grant directly to non-profit group day care programs and to family day care centres through family day care support programs for maintenance and acquisition of equipment;

11. program budgets and grant ceilings for those funds currently available for start-up costs for new programs, and emergency renovations, relocation and repair for existing programs be increased for both centre-based and family care; and

12. low-interest loans, through existing small business and home renovation loan programs, be made available to renovate and repair family day cares and existing owner/operator centres to meet licensing standards.

Administration and Infrastructure:

Funding is required at the provincial, community and program level to enable the flexible delivery of a continuum of care options that take into account a variety of needs.

THE TASK FORCE RECOMMENDS THAT:

13. the provincial government, under the auspices of the proposed child care authority, provide funding for the community-based development boards and related resources and supports as described in Section VIII - Community-Based Delivery;

14. the Ministry of Social Services and Housing provide an administrative fee to child care programs that accept subsidized children to offset the processing cost to the operator;

15. the Ministry of Social Services and Housing provide a recoverable entry fee or deposit for subsidized children where such a fee is normally required by the program;

16. the funding provided to community colleges by Ministry of Advanced Education, Training and Technology to deliver and support early childhood eduction and training programs be linked to expansion goals and provided on a targeted basis to increase the number of available seats in early childhood education programs; and,

17. the provincial government provide funding to existing and new non-profit family day care support programs to recruit, support and monitor caregivers.

As the needs to which the above recommendations pertain are addressed, it is recognized that there is the potential for an unnecessarily complicated set of programs.

THEREFORE THE TASK FORCE RECOMMENDS THAT:

18. the proposed child care authority have, as a top priority, the review of all funding mechanisms and, if necessary, develop a new, comprehensive funding system that is efficient, coordinated, accountable and supports a continuum of care options which are responsive to community needs.

X. CHILD CARE STAFFING ISSUES

"It is very frustrating being in a profession that has no financial worth..."

(Submission from Early Childhood Educator in Mission)

The Task Force on Child Care was instructed to identify ways to increase the number of child care spaces in British Columbia. The rate of growth will have major implications for staff training, development, recruitment and retention.

Further, quality and affordability are integrally related to staffing. The recruitment of promising students into child care educational programs and the retention of qualified staff cannot be separated from the problem of low salaries, low benefits and lack of career development opportunities. Child care operators report great difficulty in recruiting qualified staff. An increase in the number of child care facilities without the support of trained staff poses a problem.

CURRENT TRAINING REQUIREMENTS

Training requirements vary according to the licensing status of the facility, ages of the children in the facility, and the group size.

- **Informal Caregivers:** By regulation, a person may provide care on an ongoing basis for up to two children unrelated to the caregiver without having to be licensed. Unlicensed caregivers are not required to have any formal training, but some have received informal training and workshops through family day care associations or support programs.
- **Licensed Family Day Caregivers:** A licensed family day care provider may care for up to seven children (including their own) of whom no more than five are preschool children (no more than two children under the age of 24 months and not more than one child under the age of 12 months) and no more than two are school age. With the exception of a first aid certificate, licensed family day caregivers are not required to have formal training.

  Currently, some community colleges are offering short "Introduction to Family Day Care" courses and extended "Family Day Care Certificate" programs. However, these programs are optional for caregivers and the credits received are not transferable to other early childhood education programs.
- **Licensed Group Day Caregivers:** Licensees in a group day care and preschool facility must employ one "early childhood educator" and "assistants" as required by staff/child ratios identified in the regulations. Early childhood educators must complete a basic early childhood education training program offered by an approved institution or equivalent and must complete 500 hours of work experience for provincial certification. Assistants must be in the process of completing their basic early childhood education program or be given advanced recognition for previous training. There is no time requirement within which assistants must complete their early childhood education training program.

  In facilities caring for infants, toddlers or in facilities in which more than 25% of the children have identified special needs, additional training certificates in Under Three and Special Needs are required.
- **School-Age Day Caregivers:** School-age care refers to provision of care before and after school hours and during school holidays for children from school entry age to 12 years. Care must be provided by a "responsible adult"; there is no requirement for training for persons offering this type of care other

than either having completed a course on the care of young children or having relevant work experience. Some community colleges offer school-age child care training, but the credits are not transferable to any other early childhood education program.

CURRENT TRAINING PROGRAMS

All of the province's 15 community colleges, seven school boards, three private training institutions, and one distance education program are approved to deliver basic certificate level (10 month) training. Students in related degree programs at the three universities qualify for certification within their degree requirements. Post-basic training beyond the certificate level is required for staff in centres licensed for infants and for children with special needs. All of the colleges and a number of the non-college programs are approved to offer post-basic training.

The Provincial Child Care Facilities Licensing Board reviews and approves new programs in both public and private training institutions based on established provincial curricula and approved programs. The Ministry of Advanced Education, Training and Technology is responsible for providing funding to the post-secondary institutions and for ensuring that provincial funding is used efficiently and distributed equitably.

WHY TRAINING IS IMPORTANT

Quality child care is far more than custodial care. Children need a nurturing, safe, healthy and stimulating environment. Beyond that, children have a variety of needs relating to age, family background and cultural diversity as well as special physical, developmental and emotional needs. It is essential that parents who require child care have access to caregivers with the skills to meet this range of needs.

As a society, we claim to value our children. One way in which our values are reflected is by the value we place on caregiving skills and education. The following principles should form the basis for staffing in a quality child care system:

- all children are entitled to be cared for by informed and sensitive adults who have the support and respect of society;
- persons responsible for care of children in alternative care arrangements should have training which is related to both early childhood development and child care, and which is commensurate with the complexity of the job demands;
- all caregivers should be provided with training which prepares them to: value diversity and provide an accepting and supportive environment for all children, including those with special needs and those from various ethnic and cultural backgrounds; and to recognize the expertise of parents regarding the care of their own children, and to work in partnership with parents;
- all non-parental caregivers, not required by law to be certified, should be encouraged and supported to seek training; and,
- retention of trained and experienced caregivers is essential to ensure quality of care for children.

THE DEMAND FOR QUALIFIED STAFF

Statistics Canada indicates 58% of women with pre-school age children are in the work force. Labour projections for the next decade indicate women will comprise a substantial proportion of new labour force entrants, resulting in increased demands on the training system. The current system is already struggling unsuccessfully to meet the demand for trained caregivers.

At present, there is no way of knowing exactly how many trained early childhood educators are required. The number of early childhood education seats that are funded each year is driven by the requests for funding from the college system which theoretically reflects community need. However, the early childhood education programs compete for funding with a variety of programs at the community level. Therefore, the seats funded may not accurately reflect the demand for early childhood education training.

As of September 1990, there were 4,657 staff with basic early childhood education qualifications. Of

these, 447 had infant and toddler qualifications and 256 had special needs qualifications. Not all of these certified personnel are working in child care settings. While no ministry keeps statistics on the number of practicing certified staff, staffing shortages have been reported throughout the province. Retention in the field is seen as a significant problem. This situation is reflected at the national level also and has resulted in a national child care study to examine wages, working conditions and turnover nationally and by province. The study is funded by the Child Care Initiative Fund and jointly sponsored by the Canadian Child Day Care Federation and the Canadian Day Care Advocacy Association. Results from this survey are expected in March, 1992.

One of the key contributors to turnover is the salary level of child care staff. The National Child Care Staffing Study in the United States found that "...of all the factors examined in the adult (day care) work environment, salary level is the most important predictor of quality of care".

No current province-wide information about salaries or income levels for child care staff and family day care providers is available for British Columbia. A September 1990 survey of group day care centres in Vancouver conducted by Information Daycare showed salaries for qualified staff ranging from $6.48 to $12.77 per hour for an average of $8.49 per hour. The salary range for supervisory staff was from $7.95 to $14.64 per hour for an average of $10.80 per hour. It should be noted that Vancouver salaries are among the province's highest. In fact, the current salary has not improved significantly over the past six years, as illustrated by the 1986 Schom-Moffatt survey findings which indicated that the average salary in British Columbia was $7.40/hr.[1]

Child caregiver salaries represent a critical factor which will ultimately affect the impact of any recommendations made by the Task Force. Wages paid to child care staff, who are predominantly women, are consistently lower than wages of other comparably educated women in the workforce and dramatically lower than wages paid to comparably educated men. While we are seeing a role for men as caregivers, low wages will continue to hinder recruitment of all caregivers.

Other factors affecting the supply of certified staff include lack of benefits, poor working conditions, lack of career development opportunities and lack of ongoing training.

Due to limited information, we do not know exactly how staff turnover affects our staffing shortages in British Columbia. The potential costs of turnover should not be ignored. Continuity in caregivers is an identified variable in quality care. According to the U.S. National Child Care Staffing Study as reported in U.S. News & World Report (Oct.23, 1989) "...children in programs where turnover was highest scored lowest on verbal and socialization skills, played less with classmates and spent more time in 'aimless wandering'".

Trained child care staff leave their jobs at a rate which, in Canada, may exceed 15 percent per annum.[2] The 1982 survey of early childhood educators in British Columbia, prepared for the Ministry of Education, found that about 30% of early childhood educators leave the field annually with approximately half returning within one year to 18 months.[3] Given that some of these staff may move to other child care jobs or may eventually re-enter the field, it is not at all clear what the actual attrition rate is in terms of net loss of early childhood education trained personnel in British Columbia. However, if the number were 20 percent per annum then the average length of stay in the field would be five years. The current number of early childhood education spaces in educational institutions is approximately 450, and the cost is $5,765 to train one person to the Basic Certificate Level. Given these statistics, the cost of attrition of early childhood education qualified personnel appears to be roughly $500,000 per annum. Because we lack accurate baseline data, we have no idea how much of current funding for training is going towards the cost of turnover.

[1] P. Schom-Moffatt, The Bottom Line: wages and working conditions of child care workers, Report to the Federal Task Force on Child Care, 1986.

[2] Based on information from a 1986 report by Schom-Moffatt quoted in Ontario Coalition for Better Child Care, Discussion Paper, November, 1989, p.4.

[3] M. A. Middleton, Ministry of Education, Early Childhood Education: A Survey of Practioners, 1982.

ENSURING AN ADEQUATE SUPPLY OF TRAINED STAFF

In order to develop a strategy which results in an adequate supply of qualified staff, the following issues must be addressed:

- **Facilitating the process of bringing experienced but untrained individuals into the certification stream:**

  Mechanisms need to be developed to facilitate involvement in the current certification process for those individuals who have acquired skills and knowledge related to child care through means other than formal training.

- **Targeting the dollars for expansion based on need:**

  Training funding is not linked to targeted needs. Public post-secondary institutions currently set their own priorities for program expansion. Despite the critical need for more training seats in the child care field, expansion of seats in early childhood education programs is not consistently recognized as a priority by the province's colleges. The Ministry of Advanced Education, Training and Technology should target funds specifically to local community colleges based on a needs assessment. Resources must be committed to data collection, monitoring and evaluation to ensure the accountable expenditure of public funds.

- **Rationalizing training programs to maximize transferability of credits and establish training ladders:**

  There is a lack of overall coordination of training. Students who complete courses through non-college programs generally receive no credit for their training if they transfer to college programs. Students who transfer from one college program to another may have difficulty receiving full credit for their course work. Except for one university program, graduates of college programs generally receive no credit for their training if they enter university degree programs.

  There is a need for individuals trained beyond the college certificate level to assume leadership and teaching roles in the child care field.

  Government ministries are exploring the use of early childhood education trained individuals to undertake positions related to licensing, monitoring and assessment. These individuals need to be trained past the current early childhood education certificate level.

- **Integrating exceptional care needs into basic curricula:**

  Typical children represent only a portion of the children who require quality child care. Children with special physical, developmental, and emotional needs, children from a variety of cultural and ethnic backgrounds, and children from socially disadvantaged families all have unique needs. Presently specialized post-basic training is available related to care for children with special needs and care for infants and toddlers.

  The children described above are attending integrated child care centres. Every child care worker requires an introduction to the needs of these children, so that they can begin to support these children through inclusive approaches. Existing basic curricula should be reviewed to ensure that child care workers receive training that will enable them to effectively integrate exceptional children.

- **Increasing the number of infant and toddler and special needs qualified staff:**

  Licensed settings for children with special needs and for infants require staff who have post-basic training. Such staff are in extremely short supply. This problem is caused in part by the low salary differential for staff who have post-basic training, lack of training opportunities or lack of access to degree programs. Qualified faculty to teach in post-basic programs are also in short supply in some parts of the province.

- **Encouraging training for family day care providers and link to credential programs:**

  Generally speaking, licensed family day caregivers and school-age child caregivers are not required to have training beyond basic first aid, although some local licensing offices ask that

family day care providers have additional training. Family day care training is available on a non-credit basis through several educational institutions throughout the province, but these programs vary considerably in length and depth and are not recognized for credits toward early childhood education training.

Training for informal caregivers by way of day care support agencies or programs can be expanded. Training for these caregivers needs to be more strongly encouraged, and the training rationalized to allow transferability to early childhood education certificate programs.

- **Expanding the access to training across the province:**

Individuals who are unable to attend existing early childhood education training programs because of personal circumstances or geography have very limited training opportunities. Open learning/distance education opportunities for training program delivery using a multi-model delivery model need to be expanded to meet the needs of those who cannot take part in traditional program delivery.

It is evident that addressing these issues presents a complex task. The Task Force is aware that the Ministry of Advanced Education, Training and Technology has committed to undertaking a training review and that an advisory group made up of industry representatives, employers, educators and parents will assist in this review. The Ministry of Advanced Education, Training and Technology is to be commended for developing a consumer-oriented approach. Consumer input is crucial to developing a workable, effective solution to this problem.

The Task Force identified the following priorities related to staffing:

- to provide sufficient, accessible training;
- to provide a continuum of training opportunities, with multiple entry and exit points; and,
- to provide adequate salaries in order to retain qualified workers in the field.

RECOMMENDATIONS

TO ADDRESS THESE PRIORITIES, THE TASK FORCE RECOMMENDS THAT:

1. the Ministry of Advanced Education, Training and Technology, in conjunction with the proposed child care authority:
   - develop a continuum of training and educational programs, from individual caregiver training for specific services through to professional programs for administration/policy development/research, with multiple entry and exit points;
   - maximize transferability of education and training programs amongst education institutions;
   - fund demonstration child care centres as part of training programs and provide support to community-based practicum sites;
   - expand open learning opportunities;
   - develop provincial curricula for family day care and school-age child care training and increase the availability of such training; and
   - develop assessment mechanisms to enable students with prior theory and practice experience to either challenge or be exempted from individual course requirements, excluding supervised practica.
2. the Ministry of Advanced Education, Training and Technology, in collaboration with the proposed child care authority, examine the content and length of the training programs to ensure adequate preparation for the demands of the job;
3. the Ministry of Advanced Education, Training and Technology, in collaboration with the proposed child care authority, expand the availability of opportunities for continuing education and in-service training for child care staff;
4. the Ministry of Advanced Education, Training and Technology review Early Childhood Education basic

curricula to ensure that it reflects and values cultural diversity;

5. the provincial government develop a strategy to identify and remove barriers to recruiting aboriginal and ethnic caregivers, and to increase their representation in all early childhood education and training;

6. the Ministry of Advanced Education, Training and Technology revise the Early Childhood Education basic curricula to integrate introductory components on infants, toddlers and children with special needs as an integral part of basic training; and,

7. the provincial government introduce salary enhancement grants to raise staff salaries to a level which reflects training and responsibility; and that the proposed child care authority give top priority to developing appropriate mechanisms for an accountable delivery system including the question of eligibility of existing owner-operators and family care providers.

FIGURE 4

CURRENT TRAINING AVAILABLE

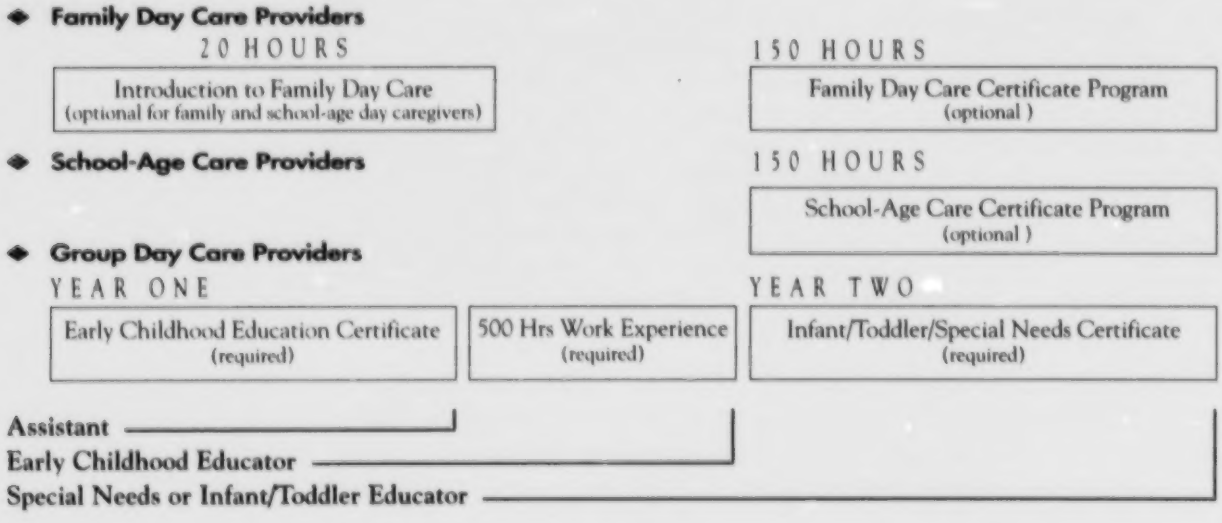
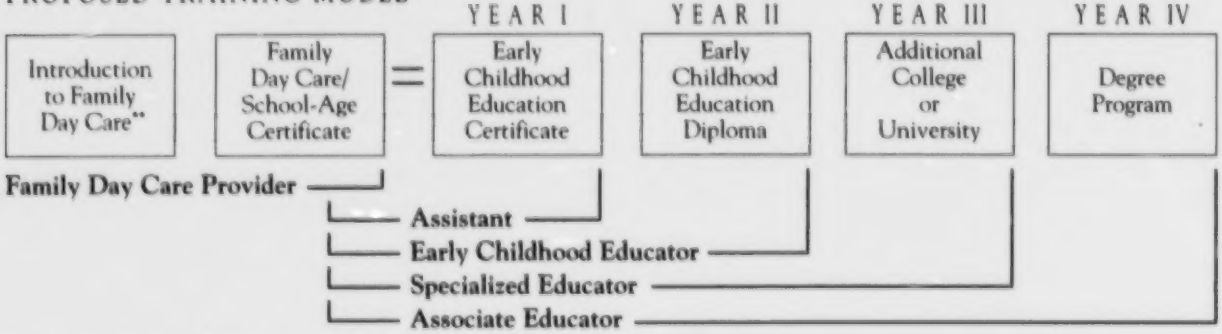


FIGURE 4(a)

PROPOSED TRAINING MODEL*



* A review of training models needs to be done in conjunction with a review of the classification and credentialing of early childhood professionals.
** Credits can be applied for Family Day Care Certificate

XI. REGULATING CHILD CARE

While there was ongoing debate about the degree to which child care should be regulated and monitored, there was strong majority support for government assuming a role in ensuring that there is a standard of care established for children and dependent adults. In situations where government funding is involved, government has an additional responsibility to ensure the accountable expenditure of public funds. Standards, such as those outlined in the Child Care Regulation, reflect the minimum level of care that the community will accept and below which the community will not tolerate.

The challenge is to create standards which protect the health and safety of children and provide a baseline for developmental programs without unnecessarily restricting or inhibiting the development of new child care spaces. The development of guidelines could provide a means to signal optimum standards to caregivers and parents.

HOW THE REGULATORY FUNCTION IS CURRENTLY CARRIED OUT

The Ministry of Health is responsible for regulating all aspects of child care provided in licensed facilities. The Community Care Facility Act and the Child Care Regulation prescribe regulations pertaining to the ratio of staff to children, space requirements, staff qualifications, health and safety considerations and programming standards. Ministry of Health personnel work co-operatively with Ministry of Social Services and Housing staff, who may assist with social assessments on applicants, and Ministry of Municipal Affairs, Recreation and Culture, who oversee fire safety inspections.

Licensing requirements vary depending on the ages of the children; for instance, infants/toddlers, three-to-six year olds, and school-age children. Currently, any person providing child care for more than two children unrelated to the caregiver is required to be licensed. (See Appendix F for more detailed information.)

The Provincial Community Care Facilities Licensing Board has delegated authority to issue licences and interim permits for child care facilities to Medical Health Officers in all existing provincial health units, and municipal health departments. An amendment to the Community Care Facility Act, which will expand the authority of the Medical Health Officers to administer the Act, has received third reading. This reflects a continuing process of devolution to the local community: as recently as 1985 the Provincial Child Care Facility Licensing Board issued all licenses.

ISSUES RELATED TO EXPANSION OF CHILD CARE

Three general themes emerge which describe how the existing regulatory system creates barriers to child care expansion: the lack of linkage between provincial regulations and local government bylaws; the need for monitoring and support; and, the need to encourage flexible models.

The Need for Linkage Between Provincial Regulations and Municipal and Regional District Bylaws:

Individuals or organizations wishing to become licensed are often faced with a confusing maze of intertwined and uncoordinated bureaucracies. Starting a licensed child care operation requires not only adherence to provincial licensing requirements, it also requires meeting municipal and regional district zoning and building bylaws. Problems may occur when municipalities enact bylaws that exceed the minimum standards required by the Community Care Facility Act without additional resources being provided to assist caregivers to meet those requirements.

The Ministry of Health recently passed an amendment to the Community Care Facility Act which enables inspectors to approve homes providing care to eight children or less in accordance with

municipal and regional district bylaws governing single family dwellings. Theoretically, this should result in a relaxation of requirements. However, municipal and regional district zoning bylaws for single family dwellings are based on new home standards and many day cares are located in older homes which do not meet the building code. Municipal and regional district building inspectors and fire marshalls are understandably disinclined to relax standards given the potential consequences.

There is a need to ensure that local governments enact bylaws which encourage or take a proactive approach to the development of child care. One approach would be to initiate an education program, in partnership with the Union of British Columbia Municipalities, to encourage a positive approach to child care development and delivery at the municipal and regional district level.

Encouraging Flexible Models:

Family day care is the care of choice for a considerable number of families. The regulatory process pertaining to family day care homes should allow for flexible models and flexible age groupings.

The Provincial Child Care Facilities Licensing Board recently undertook The Family Day Care Project to "...examine alternate family day care models that could offer greater flexibility to caregivers as they provide greater access to family day care in a community." The models allowed in the project included:

- two adults caring for seven children, birth to 12 years, three of whom may be under 24 months;
- one adult caring for seven children, birth to 12 years, with two children under 24 months, one of whom may be under 12 months; and,
- one adult caring for seven pre-school children, three years to school age.

Child care advocacy organizations expressed concern about lowering the quality of service, and the usefulness of this model as a means to increase infant and toddler spaces. The project evaluation recommended that the piloted models be permitted to continue and that they be extended to all licensed homes provided they met certain criteria:

- "The caregiver(s) have completed an acceptable training program or they have demonstrated through a comprehensive assessment that they are functioning at the level expected of a program graduate in all prescribed areas.
- That the caregiver has been providing licensed care which meets required standards for a period of at least two years prior to the extension being granted.
- That the procedures for application and granting extensions established for the pilot project become the standard procedure for all future permits."[1]

In addition, the evaluators recommended that caregivers be given greater freedom to exercise judgment regarding the number and mix of children within the maximum number permitted in their care. Further recommendations identified the need for education, program supports and networking for caregivers.

The Need for Monitoring and Support:

The Task Force recommends that licensing staff should have professional training which includes Early Childhood Education in addition to Public Health. The Ministry of Health is currently in the process of working to expand job descriptions to allow entrance of speciality/expertise areas. All current postings for Licensing Officers are open to application from people with Early Childhood Education backgrounds.

The need for monitoring and support was identified in the evaluation of the Family Day Care Project described above. The evaluation recommended "...that the methods of applying the regulations governing family day care and the role of the licensing personnel be reviewed to identify the support and resources required for them to meet their job demands and expectations of the field".

The need for this recommendation was underscored by the Western Canada Family Day Care Association of British Columbia in its submission to the Task Force:

> *"In some regions, there are long delays in the licensing process due to the high demand. There is great variability in monitoring and enforcement of standards. The licensing program needs to be strengthened through increased staffing, improved staff training..."*

[1] Provincial Child Care Licensing Board, Family Day Care Project Evaluation, April, 1990.

The need for additional child care licensing staff was echoed in the District of North Vancouver report on child care needs. Specifically, it recommended that funding be provided for additional staff given that:

> *"...The child care facility licensing staff are responsible for not only monitoring current facilities, they are also responsible for assisting operators who are interested in developing new facilities. As noted in the report, current staffing levels are inadequate to monitor current child care operations, let alone to adequately respond to concerns about illegal informal family day care or to assist in the development of new centres."*

All types of child care require support.

The regulatory framework sets a minimum standard for the care of our children, and provides a baseline against which parents can judge the quality of care that their children receive and against which child care operators can plan for optimum performance.

Changes to the regulations should not be undertaken lightly. Any changes should be balanced against the principle that the health, safety and development of children is of primary importance.

RECOMMENDATIONS

IN THIS CONTEXT, THE TASK FORCE MAKES THE FOLLOWING RECOMMENDATIONS:

1. the Ministry of Health, in conjunction with the proposed child care authority or, until it is established, Women's Programs, appoint a working group comprising key ministry staff, parent, child care and employer representatives to review the Community Care Facility Act and the Child Care Regulation to determine if changes can be made which will remove barriers to expansion while continuing to develop positive standards of care, with particular reference to flexible models to meet community needs and flexible age groupings in family day care homes;

2. that the Ministry of Health increase the number of licensing officers to ensure that expansion of child care is not inhibited by lack of licensing staff and to ensure that staff have the time to adequately monitor child care facilities in their communities;

3. the Ministry of Health ensures that licensing officers have skills and training that support their work in child care settings;

4. that the Ministry of Health provide support and assistance to Medical Health Officers and municipal and regional district officials to develop understandable information packages to assist potential caregivers with the licensing process;

5. that the proposed child care authority or, until it is established, Women's Programs establish a committee involving the Union of British Columbia Municipalities, the Ministries of Municipal Affairs, Recreation and Culture and Health to review legislation and local government practices with respect to child care facilities and to bring forward recommendations regarding:

   - existing municipal and regional district bylaws and their impact on expansion;
   - establishment of a municipal child care development fund;
   - the possibility of including, at the planning stage, child care facilities in new developments, where appropriate;
   - the possibility of including space for child care in new or renovated municipal buildings, where appropriate;
   - interpretation of municipal and regional district bylaws in a way which assists and encourages the development of licensed family day care in neighbourhoods zoned for single family dwellings;
   - common approaches to business license fees, property taxes, inspection fees, etc.; and,
   - other issues as introduced by any of the members.

6. that the Minister of Municipal Affairs, Recreation and Culture introduce changes to the Municipal Act to give municipalities the discretion to create bylaws requiring spaces for the provision of child care and/or levying development charges for child care in developments.

XII. CREATING NEW PARTNERSHIPS AND STRENGTHENING EXISTING ONES

Child care has long been considered a family issue, one which, created by families, should therefore be resolved by families. The impact of that attitude is being increasingly felt. Concerns about the lack of child care are now being expressed from all quarters. It is time to broaden our approach to develop new partnerships and strengthen existing ones to take advantage of resources wherever they exist. This integrated approach must include municipal and regional district governments, business and labour, schools, the federal government, the philanthropic community, child care organizations and communities of interest such as the disabled, aboriginal, immigrant and visible minority communities.

Municipal and Regional Involvement in the Delivery and Expansion of Child Care

Municipal and regional governments can play an important role in the delivery and expansion of child care. Municipal governments influence the development and expansion of child care through involvement in six major areas: licensing of child care facilities; land use planning; developmental dedications; business licensing; provision of community services; and social planning and support.

These applications are described below. It is important to note that municipalities have a fair degree of latitude to develop and interpret local bylaws. As a result, the requirements and costs may vary considerably from one location to another.

- **Licensing/Inspection of child care facilities:**

  Under the provincial Child Care Regulation, responsibility for licensing and monitoring child care facilities is delegated to the Medical Health Officer. The authority to administer the Child Care Regulation includes the following responsibilities: ensuring compliance to staff/child ratios; space requirements per child; staff training requirements; and, program. In this capacity the Medical Health Officer reports to the Provincial Child Care Facility Licensing Board.

  The licensing process requires compliance with appropriate zoning and building bylaws and codes. Inspections may be carried out by local inspection staff (fire, electrical, building, plumbing, health). Both the requirements for and costs of these inspections vary widely throughout the province.

- **Land use planning and regulation:**

  Municipalities are authorized to develop zoning bylaws which govern such aspects as location, type and purpose of building permitted. Municipalities have the authority to issue development permits governing these uses. Development permit processes and fees vary widely and many child care applicants are unfamiliar with these issues.

  Some municipalities allow non-profit child care centres to use municipal lands and/or buildings at little or no cost.

- **Development dedications:**

  Development dedications identify costs associated with developing and maintaining community infrastructure. Traditionally, these have included such systems as: sewers, water, parks, schools and recreation facilities and other similar systemic infrastructure. Costs are generally incorporated into the cost of development, although the developer, in certain instances, may choose to provide the service directly (e.g., developing green space for a park).

  Recent amendments to the Vancouver Charter allow the City of Vancouver to levy development charges for child care. This is currently not possible under the Municipal Act. A few municipalities have required that child care spaces be considered in major rezonings.

- **Business licensing:**

  Municipalities may set fees and determine policy for business license requirements. This may have a particular impact on family day care opera-

tions, insofar as they may be considered small proprietary businesses.

- **Community services:**

  In many municipalities, child care programming for families and children is an important part of existing community services - health units (parent/child drop-ins), libraries (story times, reading clubs), community centres (licensed preschools, preschool and school-age activity programs), parks (summer play programs, sports leagues). The opportunity exists to further develop and extend these services by "twinning" other complementary child care services (school-age care programs as part of recreation centres, day care programs sharing park space, etc.).

- **Social planning:**

  Some larger municipalities have a specialized social planning capacity. Municipal social planning departments could play a key role in assisting the community to identify needs and develop strategies to address those needs. Child care has been identified as a priority issue in several municipalities with social planning functions. The recent reports of the City of Vancouver and the District of North Vancouver are excellent examples of the role that the social planning function might play.

  The Greater Vancouver Regional District, as part of its Creating our Future strategy, is supporting discussion of child care issues and is developing an experimental regional child care initiative. In addition, as a part of its Healthy Community 2000 initiative, the Capital Regional District has established a Task Force on Children and Youth, which includes a focus on child care.

A New Role for Regional and Municipal Governments

For the most part, the municipal planning process and bylaws have not evolved with the delivery and expansion of child care in mind. Licensed facilities have attempted to adapt to a system which may inhibit and restrict the creation of child care spaces. There is, however, a legitimate and important role for municipalities to play in ensuring an adequate supply of quality, affordable, accessible child care in their communities.

Municipalities can be encouraged to develop more comprehensive and proactive planning policies and to support their implementation through the regulatory and development approvals process. Some additional legislative authority is required. Local policies and processes should be designed to ensure that: barriers to the development of child care are not created; incentives are created to support the expansion of child care; planning and coordination are addressed at the municipal level; and, that there is adequate public input, information and assistance to groups or individuals regarding licensing and the development permit process.

Principles

The following principles should be considered central to effective and proactive municipal involvement and should guide development and interpretation of policies:

- the health, safety and well-being of children is a primary consideration;
- within this context, bylaws should not unnecessarily restrict the creation of child care spaces;
- residential neighbourhoods are desirable locations for child care;
- child care needs and requirements should be a consideration in all major developments; and
- child care providers have a right to clear information to assist them to develop or expand child care operations.

The following recommendations address some of the steps which the provincial government needs to initiate in order to ensure a more effective partnership with the municipal sector.

RECOMMENDATIONS

THE TASK FORCE RECOMMENDS THAT:

1. the Minister of Municipal Affairs, Recreation and Culture introduce changes to the Municipal Act to allow municipalities the discretion to create bylaws requiring spaces for the provision of child care and/or levying development charges for child care in developments; and,

2. the proposed child care authority or, until it is established, Women's Programs establish a committee involving the Union of British Columbia Municipalities, representatives of the Ministries of Municipal Affairs, Recreation and Culture and Health to review legislation and local government practices with respect to child care facilities and to bring forward recommendations regarding:

   - existing municipal bylaws and their impact on expansion;
   - establishment of a municipal child care development fund;
   - the possibility of including, at the planning stage, child care facilities in new developments, where appropriate;
   - the possibility of including space for child care in new or renovated municipal buildings, where appropriate;
   - the interpretation of municipal bylaws in a way which assists and encourages the development of licensed family day care in neighbourhoods zoned for single family dwellings;
   - common approaches to business license fees, property taxes, inspection fees, etc.; and,
   - other issues as introduced by any of the members.

Business and Labour Involvement in the Delivery and Expansion of Child Care

A growing number of companies and unions in British Columbia have developed a new awareness and concern about the interface between work and family responsibilities. Some have embarked on programs to define and respond to these needs. But although there have been numerous recent media "success stories" depicting companies that have taken a proactive approach to assisting employees with their child care needs, these stories represent isolated situations rather than mainstream corporate policy.

The Corporate Response to Workers with Family Responsibilities (Paris, 1989) is a report commissioned by the Conference Board of Canada and based on a survey of 385 organizations, employing over one million Canadians in over 3000 worksites across Canada. The report provides a candid assessment of corporate involvement in child care at this time.

> *"...Child care benefits...are not prevalent in Canadian firms. This is so for three principal reasons: the majority of respondents have never considered such benefits, have not heard about the need for them from employees, and do not believe they should be involved in providing them. Employers believe that individuals have the main responsibility for finding solutions to work and family conflicts. Very few have actually surveyed their employees about their personal responsibilities, or intend to do so in the future."*

The Conference Board report goes on to state that these attitudes exist even though the employers surveyed were aware that balancing work and family responsibilities causes employee stress, and that 25% of employee absenteeism results from work and family conflict.

The survey also indicated that the employers who implemented proactive family-related support programs perceived benefits in the areas of staff turnover, reduced absenteeism, reduced stress and improved morale.

> **"Parents with children in less than satisfactory care are less effective employees. People cannot work at the peak of their performance when they are concerned about the quality of care being given to their children."**
>
> *(Submission from a North Vancouver parent)*

The pressures will continue to build as more women enter the work force during this decade. It is estimated that women, visible minorities and the disabled will make up the majority of new labour force entrants over the next 10 years.

In response to demands, and in anticipation of work force changes, Canadian employers and trade unions have been meeting at the negotiating table to define a range of benefits and flexible work arrangements, and to establish work place child care centres that can help meet workers' needs.

Over the past 15 years, British Columbia employers and labour organizations have jointly set up work

place child care centres. Centres at Valleyview, a provincial government work place in Coquitlam, and Royal Columbian Hospital in New Westminster have provided models for this kind of arrangement.

Southland Canada, Inc. has also provided a child care program for its employees at 7-Eleven stores and head office workers in Burnaby. In a submission to the Task Force, Southland identified some of the obstacles that they faced in developing a corporate child care centre and suggested how government could assist employers:

> *"A step by step guide on setting up and operating a day care ...is also needed and Regulations between government agencies need to be clarified. Corporations and companies also need some financial backing and incentives so employees can be assured of quality child care that allows them to be productive employees."*

Apart from lack of up-to-date information, lack of funding has proven to be a genuine obstacle to the development of child care centres at the work place.

Even the wholehearted financial and moral support of both unions and management, who have provided start-up capital, hours of volunteer work on advisory boards, and ongoing operational funding, has not saved child care centres from financial problems and operational deficits.

Employers and unions have also found that work place centres often cannot meet the need that parents may have for emergency child care, occasional, or respite child care, and night and infant care. Cost and uncertainty have precluded even the best and well-established workplace centres from meeting these needs. There are some employers and trade unions who have begun to investigate provision of flexible programs that can meet a variety of needs.

On-site child care is only one option. Others include provision of information and referral services for workers, reserving space for workers' children in existing community-based facilities, development or support to family day care providers, and contracting with outside agencies or personnel to provide emergency child care needs. Child care development funds used to stimulate child care supply, for example in developing or supporting a family day care network, are among the options which lend themselves to a collaborative, community-based approach.

Important steps can also be made toward addressing workers' child care needs through the following options:

- extended paid and unpaid parental leave;
- flexible work schedules including job-sharing and benefit plans; and,
- family leave provisions to enable parents to care for sick children, and attend medical or other appointments that require parental participation.

While individual employers, both large and small, may not feel equipped to assist their employees with child care placement problems, collectively it may be possible to develop creative solutions. "One Small Step" was introduced by the United Way of the Bay Area (San Francisco) to bring together a consortium of private and public sector employers. The purpose of the coalition was to increase employers' involvement in assisting their employees to manage work and family responsibilities. The program requires that each member of the consortium take `one small step' to assist employees to meet family responsibilities.

Appendix G describes the program in detail. The United Way of the Lower Mainland has recently introduced a similar program.

While massive involvement by the corporate sector in setting up child care centres is unlikely, many of the benefits and personnel practices already mentioned are cost-effective and easy to implement. Employers prepared to adopt flexible personnel practices, and address employee needs for information and assistance in child care, will be providing genuine assistance to their workers.

A number of British Columbia projects, several funded through the Child Care Initiatives Fund, have supported and stimulated interest in work place related child care initiatives.

The involvement of business and labour in child care in British Columbia is in its infancy, and much work needs to be done. The recommendations which follow should be viewed as a first step.

The following recommendation should be considered alongside recommendations in sections entitled the Role of the Provincial Government as an Employer and Other Ways in which the Provincial

Government Can Play a Role in the Expansion of Child Care.

RECOMMENDATION

THE TASK FORCE RECOMMENDS THAT:

3. the proposed child care authority develop a strategy to stimulate employer involvement in child care expansion.

Role of the Provincial Government as an Employer

In support of expanding business and labour involvement in child care, the provincial government must play a leadership role, as an employer signaling to the private sector that child care is a shared responsibility. The provincial government should incorporate support for the family into its overall planning and through development of workplace policies and practices which acknowledge the dual role played by parents who work. The following policies should be addressed:

- flexible work patterns;
- increased part-time and job-sharing;
- flexible training programs;
- compensation for exceptional child care costs when parents are required to work outside regular hours;
- career paths that allow for absences;
- family responsibility leave for extended illness of children; and,
- ability to use personal sick leave to care for sick children.

RECOMMENDATION

THE TASK FORCE RECOMMENDS THAT:

4. the provincial government review all legislation, regulations, policies and procedures affecting personnel practices to minimize the barriers to balancing family and work responsibilities and to develop proactive policies which enable workers to meet their family and work responsibilities.

The Role of Schools in the Delivery and Expansion of Child Care

Local school boards have the potential to play an important role in the expansion and delivery of child care by providing access to school property and/or facilities. School boards should be encouraged to recognize child care as a developmental program for socialization and education rather than as a program for custodial care only.

At the present time the role of British Columbia schools in regard to child care is mainly to provide space for programs. A recent telephone survey of 75 school districts showed that 46% of school districts have taken some initial steps in providing school-based child care. This predominantly involves renting or leasing school facilities for programs operated by existing community service organizations, non-profits established specifically for the delivery of child care services, or private operators. Involvement may be as limited as one program in the entire district or as broad as a range of programs across the district.

TABLE 13:
SCHOOL DISTRICT PARTICIPATION IN SCHOOL-BASED CHILD CARE

TYPE OF PROGRAM	NUMBER OF SCHOOL DISTRICTS	
School-Age Care	10	(13%)
Pre-School Programs (part day)	17	(23%)
Group Child Care	10	(13%)
Teen-Parent Child Care	12	(16%)
Multi-Program Involvement	11	(14%)

n = 75

The demand for school-based child care programs continues to grow while the available school space continues to decline due to increased enrollments, decreased class sizes, expansion of programs, dual entry and the new primary program.

The Canadian School Trustees' Association, in a 1989 survey, identified some of the concerns and barriers surrounding school-based child care:

- the current education climate does not encourage school boards to participate in on-site child care;
- there are problems associated with occupancy of school space. As the demand for space for in-school educational programs continues to grow, previously established child care programs may be forced to relocate to free a classroom or make room for school portables;
- base funding for schools does not identify funds for child care; school boards are unable and unwilling to take on the responsibility of funding school-based child care;
- there are concerns about demands on principals' time and responsibility in relation to administration of on-site child care;
- child care staff and teachers have different professional qualifications; and,
- there is a lack of information about how to proceed.

A New Role for Schools

The recent British Columbia Royal Commission on Education encouraged schools to focus on their responsibilities as educators. The Commission felt schools, as educational institutions, should not be held responsible for meeting all the social needs of children. However, it went on to state: "The school...perhaps should remain organizationally the centre where such services are coordinated and delivered; it must not, however, be made responsible for the provisions of such services".

The Royal Commission's Working Group on Early Childhood Education focused on the role the school system could play in delivering "...quality early developmental influences and experiences for children".

Because of changes in family structure and labour force participation, it is a reality that a majority of children under the age of 5 spend at least a portion of their day being cared for by non-familial adults. The impact of quality early childhood care programs is well documented and the costs are more than made up for by the benefits. Taxpayers have already spent millions of dollars for school sites and facilities in British Columbia. These existing facilities could be augmented and used to fuller advantage by implementing preschool programs, before-and-after school care and full-day child care programs.

The confusion and stress for children (and for their parents) who travel from school to child care would be considerably lessened through the full-service school. The child would remain in a familiar setting and the liaison between the caregiver and the teachers would create the continuity that the child needs. The school system has a major role to play in the delivery of quality child care but the ideal, integrated model of a public school, a child care centre and a community centre is, for many schools and communities, a long way down the road. However, we can make a beginning by bringing together the key players — parents, caregivers, teachers and school boards.

In order for schools to embark on this new role school boards will have to:

- be prepared to enter into a partnership with caregivers to make quality child care accessible to the parents in the district;
- be prepared to take on a new role and explore innovative approaches;
- work with community groups to develop a plan for school-based child care;
- look at utilizing available (tax paid) resources; and,
- look at coordinating on-site child care and school-based programs.

The impact of formal and informal learning in the early years, and the role that parents, caregivers and peers play between this stage and future learning stages in the school system, is vital. The development of intellectual skills, social skills and self-esteem is a process that begins before school entry.

Several of the barriers identified above are complex and solutions will require a long-term strategy. In the short term, school boards that are willing to participate in delivery of child care should be supported in doing so. The issue of administration can be addressed by encouraging partnerships where school boards provide space or land and non-profit organizations administer the child care program.

RECOMMENDATIONS

THE TASK FORCE RECOMMENDS THAT:

5. the proposed child care authority, in conjunction with the Ministry of Education and the British Columbia Association of School Trustees, give high priority to developing a strategy to expand school involvement in the delivery of on-site child care; and,

6. funds be made available to relevant ministries for construction, renovation, retrofitting and occupancy costs of child care facilities in new and existing buildings used by provincially funded services, (e.g., schools, colleges, and hospitals) and that the development of on-site child care in school settings be established as a priority.

The Federal Government's Involvement in Expansion of Child Care

It is difficult to assess the federal government's current intentions regarding child care. Since Bill C-144, the National Child Care Act, died on the Order Paper in 1988, there has been nothing to take its place. The Child Care Initiatives Fund has served to increase our awareness of the problem and to test some innovative solutions, but it has not been designed to address the expansion of spaces as no capital funds are involved. This lack of explicit federal policy is even more worrisome in light of the recently imposed 5% ceiling on Canada Assistance Plan expenditures aimed at the "wealthier" provinces. In light of a probable recession, this limitation on cost-sharing may serve to further depress provincial social services expenditures. With respect to child care, this reaction may deepen the recession as fewer child care resources may result in some parents' withdrawal from the work force.

Federal taxation policy may impact on family child care choices and costs, both directly and indirectly. There was some debate within the Task Force whether the Income Tax Act favours dual-earner families over single earner families. Proponents of both sides of the argument have marshalled impressive statistics to prove their case. The Task Force reviewed material from the Family Services Association of Edmonton which concludes that dual-earner families pay proportionately more taxes than single earner families with the same gross income, and from Kids First, a parent advocacy organization, which argues the opposite. The Income Tax Act in its intent or application should not inhibit or penalize families who choose to have a parent at home, nor should it penalize parents who require child care to enter or maintain their participation in the workforce.

The provincial government should press the federal government to remove tax disincentives that discourage parents from choosing to stay home to care for their own children. For instance, the Federal Income Tax regulations only allow one person in a two parent family to deduct RRSPs from taxable income.

The federal government should be encouraged to address the following options as well:

- review the existing tax system with a view to developing family income policies which would assess family as opposed to individual income for single earner families;
- investigate concepts such as income splitting and homemaker benefits for families with preschool children;
- increase the CEIC training allowance to adequately reflect the cost of child care or at least to be consistent with provincial subsidy levels;
- amend the "Challenge" program to allow hiring students for child care where the service is essential to enabling farm families to operate their farms most efficiently; and
- change the existing tax regulations that result in child support payments being taxed in the hands of the custodial parent, thus increasing the amount of spendable dollars available to custodial parents for the care of their children.

RECOMMENDATIONS

THE TASK FORCE RECOMMENDS THAT:

7. the provincial government undertake immediately to lobby the federal government to enact a National Child Care Act which provides cost-sharing for capital, operating and administrative costs associated with child care; and

8. the proposed child care authority consider the child care issues related to federal legislation and policies and develop an agenda for discussion at the federal/provincial/territorial level.

Other Ways in which the Provincial Government Can Play a Role in the Expansion of Child Care

Government, through a range of policies, has a direct impact on families and the child care choices they make. One of the major policies, the Guaranteed Available Income for Need Act (GAIN), impacts parents dependent on income assistance and the child care choices that they make.

GAIN policy currently requires that single parents with children over six months of age must return to work or be actively seeking work. Given that infant care is the most difficult to find, this policy may result in women accepting poor quality care in order to comply with policy requirements.

Currently only 5% of children in infant care are in licensed care. Single parents on income assistance often have limited job skills and end up in poor-paying jobs. It is false economy to pressure these parents to accept low paying employment, consequently provide GAIN benefits for those who qualify as low-income earners, and pay child care, rather than allowing the parent to care for her/his child. Many groups representing low income families have expressed concerns and encouraged changes in this area.

The government of Alberta recently introduced changes to its policy allowing single parents to remain at home until their youngest child is two years old.

Parental choices are also impacted by the Day Care Subsidy Program. While eligible parents in British Columbia are able to use their subsidy [illegible] wider range of options than in any other province or territory, the restrictive income criteria excludes many low income families who desperately need assistance with their child care costs. Further, the social criteria clearly discriminates against student parents, particularly two full-time student parent families. Only in British Columbia are student loans considered income for the purposes of determining eligibility for subsidy and two full-time student parents deemed ineligible for subsidy regardless of their net income.

Day care subsidy policies and procedures also impact caregivers. The Ministry of Social Services and Housing has made a considerable effort to provide quick turnaround on subsidy billings, but a problem remains. Non-subsidized parents pay child care fees in advance; payments for subsidized families are paid in arrears. This results in complicated administrative procedures. Where there is a payment delay, centres have to carry credit charges in order to meet payroll.

Centres and family care homes who accept subsidized children are effectively penalized; some centres and family day cares refuse to accept subsidies. From an accountability perspective, it is not feasible to pay subsidies in advance, but some compensation for administration costs should be considered.

Employment standards legislation effects child care options for British Columbia families. Currently parents wishing to take advantage of the new federal Unemployment Insurance Commission parental leave provisions are not entitled to the full leave under the Employment Standards Act. Furthermore, the exclusion of domestic workers from this legislation means that nannies, even those with several years of training, have little or no protection in regards to working conditions, employment benefits or minimum wage rates.

RECOMMENDATIONS

THE TASK FORCE RECOMMENDS THAT:

9. the Minister of Social Services and Housing introduce changes to GAIN policy to give single parents with dependent children the choice regarding employment outside the home;

10. the provincial government investigate the feasibility of introducing tax incentives available to low income families to assist parents who wish to stay at home with their children;

11. the Ministry of Social Services and Housing, in collaboration with the proposed child care authority, develop a proactive approach to delivery of the subsidy program that results in increased accessibility and increases awareness of the Ministry's child care programs; and,

12. the Minister of Labour and Consumer Services immediately introduce an amendment to the Employment Standards Act that will result in maternity leave equal to or greater than the period covered by the Unemployment Insurance Act.

XIII. THE SOCIAL AND ECONOMIC BENEFITS OF PROVIDING QUALITY CHILD CARE

"We are of the strong opinion that the government, in setting its priorities, must indicate that it realizes children are our future, and take the lead in action. Money spent in the early years will be saved in the prevention of troubled teens and in the development of good citizens."

(Submission from the British Columbia Women's Institute)

Concern is frequently expressed about the cost of providing adequate quality child care. There is no doubt that the costs of providing high quality child care are real. However, the benefits of providing an effective child care support system have to be the balance. Child care is an essential part of our economic and social infrastructure. An investment in child care will have a long term impact on the economic and social life of this province.

To a substantial extent, the growth of the British Columbia economy over the past several decades has involved increasing participation of women in the provincial work force. The number of women in the British Columbia work force grew from 218,000 in 1966 to 701,000 in 1989. Over this period, the female labour force grew by a factor of 3.2, i.e., the 1989 total was 3.2 times that in 1966. In comparison, the male labour force grew by a factor of 1.7 to a total of 877,000.[1]

The importance of female workers to the economy of British Columbia is obvious. Their employment is key to much of the economic output of the province. Further, their income is a major factor in the expenditures on goods and services, savings and tax payments in the province. Collectively, British Columbia female workers earned approximately $11 billion in 1989.[2]

The importance of expanded female participation in the labour force is underlined by emerging labour shortages. "In the 1970's, Canada's labour force grew by 300,000 people a year; the rate forecast for the 1990's is 180,000 people a year."[3] Surveys by the Canadian Manufacturers' Association, the Canadian Federation of Independent Business and Statistics Canada have shown an emerging pattern of shortages in skilled labour[4] which is likely to become a major constraint after the current economic recession has passed. British Columbia's economic edge will be lost if we do not provide sufficient supports to maintain our labour force.

Working Women and Child Care

Women who are in the work force in British Columbia are employed predominantly in the service sector, which is also the fastest-growing part of the provincial economy. The 526,000 women employed in British Columbia service sector jobs in 1988 represented 52 percent of employment in that sector. Their involvement clearly is a key factor which has facilitated this growth.[5]

Of women with children under 6, some 56 percent were in the labour force in 1986. In that year, 15 percent of working women (94,000) had children under 6, and a further 30 percent (192,000) had older children at home. Child care plays an important role in facilitating the participation in the workforce of

1 Statistics Canada, publication 71-001, quoted in Policynet Communications Ltd., Women in British Columbia, A Statistical Report, prepared for Women's Programs, Ministry of Government Management Services, April, 1990, p.40.

2 Based upon average annual earnings of $15,578 as reported in Statistics Canada publication 13-217.

3 Employment and Immigration Canada, Success in the Works, A Policy Paper, 1989, p.2.

4 Ibid.

5 Statistics Canada 71-529 cited in Policynet Communications Ltd., op.cit., p.49.

the former group in particular.[6] It appears that the availability of child care is a key factor in facilitating the earnings of roughly $1.6 billion annually by working women who have children under 6 years of age.

The amount paid for child care in licensed facilities in British Columbia is summarized in the following table:

TABLE 14:
LICENSED CHILD CARE AS AN ECONOMIC ACTIVITY

AGES	LICENSED CAPACITY	AVERAGE MONTHLY RATE* ($)	TOTAL ANNUAL PAYMENTS ($ MILLIONS)
0 - 36 months	3,107	500	18.6
3 - 6 years	17,475	350	73.4
6 - 12 year	8,889	150 - 325**	19.1
TOTAL	**29,471**		**111.1**

Source: Westcoast Child Care Resources Centre, and survey data from Information Daycare.

* Combined group and family-based child care.

** School-age care for 10 months plus full time for 2 months.

In addition, there are approximately 58,700 children under 36 months and 41,100 children aged 3 to 6 years in other care. It is not clear what the total payments would be for this. The following table illustrates the impact if other care were paid for at rates equivalent to family day care [7].

TABLE 15:
ESTIMATE OF ECONOMIC IMPACT OF INFORMAL CARE

AGES	ESTIMATED NUMBER OF CHILDREN	AVERAGE MONTHLY RATE ($)	TOTAL ANNUAL PAYMENTS ($ MILLION)
0-36 months	29,350	440	155
3-6 years	20,550	350	86
TOTAL			**241**

Combining amounts paid for licensed child care with those for other care indicates total annual payments for child care in British Columbia are roughly $350 million. Of this amount, roughly 85 percent[8] or $300 million goes to wages, salaries and benefits of child care workers. These payments in turn are respent in the economy with an overall further impact of approximately $150 million.

Using the numbers of children in child care as indicated above, prescribed minimum ratios of children per child care worker, and allowing for substitute workers, the number of jobs involved in the provision of child care services can be calculated. A conservative approximation based on this approach is that there are the equivalent of at least 15,000 paid full-time jobs involved in child care in British Columbia. This does not include caregivers who do not declare earnings from providing child care. The respending of child care worker salaries would likely add a further 3,000 jobs to the British Columbia economy.[9]

Child care clearly generates substantial economic activity in this province.

Economic Impact of Capital Investment in New Child Care Spaces

The amount invested to create new child care spaces and the corresponding economic impact vary widely depending on the circumstances. Where existing structures are being converted, costs may range from $3,000 to $6,000 per space. As a first approximation, a new portable structure might involve a cost of $6,000 per space (exclusive of land costs). New structures cost in the range of $10,000 to $15,000 per space, plus the cost of land. These estimates include an allowance for the outdoor play areas and equipment which are essential complements to indoor space.[10]

Assuming an average cost of $7,000 per space, creating the physical facilities for 1,000 centre-based day care spaces would cost $7 million in new investment exclusive of land. The corresponding economic impact in British Columbia would involve an increase of $6.4 million in the gross domestic product of

[6] Ibid., pp. 47-38.

[7] There is some evidence that rates are at least equal to rates for licensed facilities.

[8] Approximation attributed to Martha Friendly, the Child Care Resource and Research Unit, Centre for Urban and Community Studies, University of Toronto.

[9] Based upon information provided by Quantitative Analysis Branch, British Columbia Ministry of Finance and Corporate Relations.

[10] Based upon information provided by Mr. Peter Turje of Larry MacFarland Architects, Vancouver.

the province, 45 person-years of direct employment in the construction industry, and a total of 144 person years of employment overall.[11] It should be noted that the creation of centre-based child care spaces is only one way in which spaces can be provided. Less costly alternatives include expansion of family day care spaces and renovating and retrofitting existing spaces.

The creation of new centre-based child care spaces and the renovation and retrofitting of existing facilities will impact capital investment. Economically, this type of activity provides an excellent counter-cyclical balance. Further, the economic activity occurs across the province, spreading the benefits to all British Columbians.

Economic Benefits of Child Care for Families and Employers

Research and experience in other jurisdictions indicate that, "...providing child care does make it possible for more parents to work to support their families and that making child care available to low-income working families costs less than maintaining them on welfare. For many two-parent families, the second income, made possible by the availability of child care, is the only thing that stands between them and poverty."[12] "There is abundant evidence lack of reliable, affordable child care is a major obstacle to parents finding work, remaining employed and increasing family income by working additional hours."[13]

For a two-parent family, where child care permits both parents to work, a good deal more income tax revenue is received by government than if one parent remains at home. An Alberta study in 1988 indicated that the difference ranged from approximately $1,100 to $3,300 per annum, with the most frequent situation corresponding to the highest amount.[14]

"Employers and the economy benefit from quality, dependable child care since the working parents who use the child care services are more productive on the job.... For parents who lack child care, this lack is one of the significant predictors of job absenteeism. In addition, parents who have access to some child care but have to contend with breakdowns in the system are more likely to arrive at work late, leave early, and exhibit stress-related symptoms, all of which undermine their effectiveness on the job."[15]

Child Care and the Economic Activity of One-Parent Families

Female lone-parent families have a relatively low average income, averaging $18,945 in 1987 throughout Canada. All families in Canada had an average income of $50,000 in 1987. In 1989 average female single parent income in British Columbia was $15,578; average family income in British Columbia was $49,442.[16]

In British Columbia, 82% of one-parent families are headed by women. Approximately one third of lone-parent families in British Columbia received income assistance in 1989.[17]

In order for women with young children at home to attain higher levels of income, participation in the work force is usually required. To facilitate that, child care is essential. The availability of child care is a key ingredient enabling these women to move from a position of economic dependency on income assistance to making an economic contribution to the income of the province.

Economic Benefits Involving Disadvantaged Children

Research indicates that early childhood education and quality day care programs are likely to have a significant positive benefit for disadvantaged children, particularly those from families in lower

[11] Based upon information provided by Quantitative Analysis Branch, British Columbia Ministry of Finance and Corporate Relations.

[12] Edelman, Marian Wright, "Economic Issues Related to Child Care and Early Childhood Education," Teachers College Record, Columbia University, vol. 90, No. 3, Spring 1989, p. 344.

[13] Ibid., pp. 344-345.

[14] The Family Service Association of Edmonton, A Comparison of Net Tax Contributions by Two-Earner Families That Use Day Care and One-Earner Families with Pre-School Children at Home, December, 1988.

[15] Edelman, op.cit., p.348.

[16] Statistics Canada publications 13-207, 13-217. It should be noted that these income levels are for families with children up to 19 years of age, with income from any source, including benefit payments.

[17] British Columbia Ministry of Social Services and Housing, quoted in Policynet Communications Ltd., op.cit., p.63.

socioeconomic circumstances. The impact seems to be more significant where day care is combined with an educational component which provides an academic head start for the children involved.

A relatively immediate effect is the improvement in intellectual performance of children entering school. The research which is available indicates that while this effect declines over several years, there are perhaps more significant longer-term effects which have social and economic importance. For socioeconomically disadvantaged children these include:

- a substantial reduction in the need for remedial education classes;
- a substantially higher likelihood of completing high school;
- a significantly higher likelihood of continuing to post-secondary academic training;
- substantially less likelihood of being arrested;
- less likelihood of receiving welfare as a young adult;
- lower rates of teen pregnancies;
- as a young adult, much greater likelihood of being employed; and,
- higher average earnings, personal savings, and levels of job satisfaction.

The most thorough economic analysis of the effects of quality child care indicates a ratio of benefits to costs of between 4-6 to 1. Even making allowances for special circumstances such as different settings, an analysis of relevant literature indicates that a positive benefit-cost relationship is likely to apply generally to the provision of child care/preschool education for socioeconomically disadvantaged children. This underlying research indicates that while the children themselves are major beneficiaries, society or, more particularly, taxpayers also benefit substantially.[18,19]

For preschool children, "... access to quality child care services may determine not only their prospects for success in school, but their prospects for success in life; for example, the risk of...dependency, handicapping conditions, psychological problems, and even crime".[20] One study "...estimated that a $1 investment in preschool education returns $6 in taxpayer savings because of lower education costs, lower costs of public welfare and crime, and higher worker productivity".[21]

[18] Cameron, Vera, The Benefit-Costs of Preschool Child Care Programs: A Critical Review, prepared for the Special Committee on Child Care, (Government of Canada), 1986.

[19] MacKillop, Barry, and Clarke, Michelle, Safer Tomorrows Begin Today, Canadian Council on Children and Youth, Ottawa, 1989. pp.6-7.

[20] Edelman, op.cit., p.146.

[21] Ibid.

XIV. SUMMARY

Providing a continuum of quality child care options that are accessible and affordable for British Columbia families will require decisive action as outlined in the following seven objectives:

- establish a mandate which ensures effective planning and coordination and the means to deliver a comprehensive continuum of quality child care services;
- deliver a continuum of quality child care options responsive to community strengths, needs and priorities;
- increase funding and diversify funding mix to support the development, ongoing viability and quality of a continuum of child care options;
- provide and expand sufficient, accessible early childhood education and training programs through a continuum of training opportunities;
- ensure the development of a comprehensive early childhood education curricula which reflects the diverse needs of children and families;
- ensure that government legislation, policies, procedures and licensing processes do not create unnecessary barriers to access or provision of quality child care options and develop legislation, policies and procedures which result in increased quality child care options; and,
- introduce initiatives and establish and strengthen partnerships to stabilize the existing child care base and support quality, accessibility and affordability in an expanded child care system.

All British Columbia families need some form of child care. Providing quality child care will bring both social and economic benefits to all British Columbians. Most of all, the provision of a continuum of quality child care options will demonstrate, through action, our commitment to caring for our children, our most valuable resource.

AN APPROACH TO ABORIGINAL CHILD CARE

BACKGROUND PAPER

PREPARED BY ARDYTH COOPER

AN APPROACH TO ABORIGINAL CHILD CARE

BACKGROUND PAPER
Prepared by Ardyth Cooper

This section provides some perspective to the situation of the First Nations population in order that the design of child care can be seen as an integral part of the healing and rebuilding necessary to restore traditional cultural values and to create a structure for the continuance of these values and traditions to successive generations.

While there are aboriginal families that function well, the high levels of dysfunction in the First Nations communities are well-known and well-documented. Recently, the detrimental effects on First Nations by the church-run residential schools, have been revealed at least in part. These effects include sexual abuse of children by priests, brothers, and other staff; as well as resultant substance abuse, a lack of parenting skills, and a disruption of culture and traditions. Add to these, low educational achievement, high unemployment and little opportunity for economic development and the reasons for despair in many communities should be apparent.

Poverty in First Nations communities is also prevalent. First Nations people have been treated as less than equal by government and the majority population for generations. History reflects the treatment of the First Nations population as second-class citizens. The attitude has been that second-rate is good enough if it is "only for the Indians". It should not be surprising that after generations of such treatment and the dysfunction described above that on occasion First Nations people themselves subscribe to a culture of poverty wherein bare subsistence has become almost the accepted norm.

It is obvious that more than bandaids are necessary to rectify the situation described above. However, given the significant role of children within First Nations and the leadership and commitment by the First Nations to creating solutions to these problems, a system of child care for First Nations children may be a valuable step in the renaissance of community caring and responsibility.

> *"We recognize that our parents, our extended family and our elders are our first and foremost caregivers. The twenty-three children we presently have in care are having their physical, emotional, spiritual and social needs being simply supplemented by our child care program. Early childhood education should then be considered as the underlying force that will shape each child's future."* (Charlene Belleau; *AFN Report pg. 196).*

> *"We cannot say enough about the importance of family care, but what is even more important is that does not mean that every family you are dealing with is necessarily good. Communities must acknowledge that there are problems and that we have to recognize in some situations that we are dealing with problems and have to face them head on."* (P. Fontaine *AFN Report, pg. 200).*

AN APPROACH TO FIRST NATIONS CHILD CARE

First Nations children are a community resource to perpetuate community values not as a possession of the parent or to give identity to the parent. Children are the vital link which will pass on the cultural identity to the next generation. Today, with many First Nations addressing the need for community and individual healing, quality child care provides an opportunity to begin the creation of healthy communities. A culturally appropriate system of care for First Nations children may well be a means to preserving and building on the existing traditions and values in the First Nations communities.

"First Nations look to child care centres for the revival of their culture and values. Many of them want to educate children, from infancy onward, in their own languages, customs, and values so that they can reinforce their sense of identity, give them a sense of pride and belonging and stem the appalling loss of self-esteem that their people have suffered through a century of cultural battering." (AFN Report)

The right and responsibility to develop a quality system of child care for First Nations children rests with the First Nations.

"In establishing the organization communities affirmed that Micmac children do not belong to the province, nor do they belong to the federal government – they are the responsibility of the Micmac Nation." (AFN Report, p. 122)

As such, a specific program of First Nations child care has not been developed by this Task Force. The components have been identified by a variety of First Nations people as critical for inclusion in the development of quality child care for First Nations children.

1. **Aboriginal language training:** This is the most important component for an aboriginal child care program as it provides the unique window on the world for the aboriginal child, distinct from children of other cultures. Through this, the aboriginal world view is perpetuated.

2. **Quality aboriginal child care must be inclusive:** Program design must include the best from each system to create quality child care. The traditional as well as the modern day skills must be taught for the First Nations child to thrive.

   "Cultural appropriateness in Native child care programs means equipping children for the future, amalgamating traditional and non-traditional."

3. **Parental Involvement:** National studies have indicated the need for parent involvement is critical to the success of any aboriginal child care program. In urban areas the census data indicates that approximately 40% of aboriginal families are headed by single parents. Many of these households will be headed by single mothers. It is equally important to remember that single men also head up single parent families. They may find the task of parenting and caring for a child full-time even more onerous than the single women, having had no experience or expectation that they would be a full-time parent.

   A number of favourable and useful spin-offs do occur and could occur still more frequently as the result of quality child care. For example, it is not only the child that benefits from the positive interaction that could occur through child care, but the parents as well. Many people have identified the benefits of Positive Native Parenting groups which could easily emerge as the result of voluntary interaction through First Nations child care. Meeting other parents who have a greater degree of expertise in child rearing might be helpful to young mothers and fathers.

4. **Child Care Staff:** The role of the child care worker has been touched upon briefly. There is consensus that staff need to be informed and culturally sensitive people who can help to develop children to their fullest potential. The following definition of aboriginal child care provides some insight into the need for culturally appropriate care and the very significant role of the extended family and the community in the provision of the care.

   "Native Child Care…refers to the nurturing and looking after children, in a manner appropriate to native culture and needs, by parents, Elders, extended family and the community." (Native Child Care: "The Circle of Care"; Native Council of Canada, Page 2)

   The child care worker's importance increases greatly in light of the enormous responsibility for providing a unique cultural component to the community. Given this responsibility and the potential impact of quality child care, it may well be appropriate to examine the career possibilities for those child care workers.

   The establishment of a scholarship fund to promote aboriginal expertise in child care may well serve to develop expertise internal to the aboriginal community. There is often hesitancy about importing non-aboriginal experts and an

initiative such as this would provide the opportunity to develop a unique expertise in the aboriginal community.

5. **Flexibility:** This is necessary in designing child care in order to address the reality of life in the First Nations communities and the parents' own needs. Service providers also see the need for temporary emergency care available round the clock.

6. **Volunteerism:** Creating solutions to child care or any other problems in the aboriginal community requires a great deal of voluntary work. There are two aspects to volunteerism; the need for more volunteers to assist in assuming responsibility for the provision of child care, and also the need for quality child care when the parent is carrying on a voluntary community responsibility.

The many tasks of creating healthy aboriginal communities falls on the shoulders of far too few. Community workers are over-extended; they are virtually building new institutions for the community. For the woman who accepts a great deal of responsibility in the community and then is required to contribute her time at the child care centre the requirement is enormous. A better way may be to develop the volunteer capacity in order that responsibility rests with and throughout the First Nations community.

The issues surrounding the provision of child care to aboriginal children are as complex as they are important. There is no one solution to creating quality aboriginal child care. We will fall short of the mark if we believe that one demonstration project or one more aboriginal child care worker or a few more "Native Days" will be anything more than a token attempt to create solutions.

The jurisdiction to deal with these issues is with the aboriginal community. There is a need for consensus on the approach to First Nations child care and it is with that in mind that the following recommendations are made.

RECOMMENDATIONS:

Given the tight time frame of this Task Force and the complexity of this issue, it is recommended that:

1. the proposed child authority or, until it is established, Women's Programs establish an aboriginal working committee on child care. Such working committee be responsible for presenting specific recommendations to ensure the development of community-based, quality, child care reflecting aboriginal values based on these guiding principles and including ongoing current aboriginal achievements in child care;

2. the Ministry of Advanced Education, Training and Technology review Early Childhood Education basic curricula to ensure that it reflects and values cultural diversity;

3. the provincial government develop a strategy to identify and remove barriers to recruiting native and ethnic caregivers, and to increase their representation in all early childhood eduction and training;

4. the proposed child care authority or, until it is established, Women's Programs initiate pilot projects to develop aboriginal "owned and controlled" child care programs which are culturally appropriate and reflect the diverse cultural values of the aboriginal communities; and,

5. the proposed child care authority consider the child care issues related to federal legislation and policies and develop an agenda for discussion at the federal/provincial/territorial level.

APPENDIX A

TERMS OF REFERENCE AND MEMBERSHIP LIST

FOR THE TASK FORCE ON CHILD CARE

MINISTER'S TASK FORCE ON CHILD CARE

PURPOSE:

The Task Force on Child Care will recommend to the Minister Responsible for Women's Programs ways to increase the number of child care spaces in the Province.

TERMS OF REFERENCE:

Terms of Reference for the Minister's Task Force on Child Care:

1. (a) recommend to the Minister within six months, policies and programs which will increase the number of child care spaces, and ensure that child care in British Columbia is affordable, accessible, of high quality and appropriate to the needs of parents and children;

   (b) analyze the barriers to expansion of child care, and identify ways to overcome these barriers, including the roles and responsibilities of each level of government;

   (c) determine, more accurately than has previously been possible, the increase in the number of child care spaces which will be needed in the short and long terms;

   (d) plan the orderly growth and expansion of child care over short and longer term time frames;

   (e) consult with non-profit groups, family child care homes, corporate leaders, parents and interest groups to ensure their views are considered in studying the barriers and developing recommendations; and,

   (f) assist the Minister in public awareness, information and education initiatives related to the work of the Task Force.

2. The Inter-Ministry Committee on Child Care for Public Service Employees will liaise with the Minister's Committee, as required, to provide background material and information.

3. Members will be appointed by Ministerial Order for a period of 6 months. The Committee will meet on a regular basis with leadership from the Chairperson. They will meet with the Minister as required. The Chairperson will be appointed by the Minister.

4. Funding for 1990/91 fiscal year is estimated to be $60,000 (based upon $20,000 expended by Advisory Council on Community-Based Programs) for travel and other meeting expenses. The Ministry Responsible for Women's Programs will handle financial and accounting procedures on behalf of the Council.

September 12, 1990

MEMBERS OF TASK FORCE ON CHILD CARE

Peter Ashmore
Resource & Information Coordinator
Westcoast Child Care Resource Centre

Doris Cherry
Group Day Care Operator

Rita Chudnovsky
Children's Advocate
City of Vancouver

Penny Coates
Co-Chairperson
Past Vice-President
Canadian Day Care Advocacy Association
Director of Day Care
Simon Fraser University

Ardyth Cooper
Program Developer
Helping Spirit Lodge

Vilma Dube
Founding Member
Immigrant & Visible Minority Women

Linda Ellison
Director
Kelowna Family Day Care Society

Sandra Griffin
President of Early Childhood Educators of B.C.

Kathleen Higgins
Member, Western Women for Family Life

Gary Johnson
Vice-President
Human Resources
MacMillan Bloedel

Isabel Kelly
Co-Chairperson
Government Management Services

Charles Lauzer
Mayor, Cherwynd

Gayle Martin
President, Langley Chamber of Commerce

Elaine McLeod
Project Coordinator
Vancouver Neurological Centre

Paula McRae
School Trustee
Kamloops

Nicole Parton
Journalist and Social Commentator

Myrna Popove
Chair of the College Board, Douglas College

Joan Poweska
Director of Nurses
Kimberly & District Hospital
Alderman, Cranbrook City Council

Mary Rowles
Director of Women's Programs and Education
British Columbia Federation of Labour

Judy van der Meulen
Representative of the B.C. Farm Women's Network

CONSULTANTS TO THE TASK FORCE ON CHILD CARE

Angela Arkell
Director of Human Resources, Richmond General Hospital

Ed Berry
B.C. Day Care Action Coalition

Jane Boyd
Facilitator
Corporate Share-Care

Irene Brolin
Representative of the Registered Nurses' Association of B.C. (Langley)

Denise Jessiope
Early Childhood Education Instructor
Camosun College

Marjolijn Kwak
Early Childhood Education Coordinator/Instructor
Northern Lights College

Sally McQuade-Kudabe
Representative of the B.C. Teachers' Federation

Wendy Mossop
Owner/Operator
Animal Crackers Children's Centre

Bev Pollock
Manager
Children's Services
Cridge Centre for the Family

Colin Reid
Director YMCA-YWCA
Prince George

Laurel Stewart
Owner & President
Jellybean Park

APPENDIX B

ANALYSIS OF SUBMISSIONS

SENT TO TASK FORCE ON CHILD CARE

PREPARED BY ARDYTH COOPER

OVERVIEW AND SUMMARY OF SUBMISSIONS TO TASK FORCE ON CHILD CARE

I. Overview of Submissions

The Task Force on Child Care has received over 120 written submissions from organizations, groups and individuals. Many of the writers have expertise in the child care field, or are parents with children either in day care or at home. Organizations include professional associations, non-profit groups, child care businesses, and family-support groups.

A common theme in the submissions is the importance of cooperation and coordination between the different provincial government ministries and agencies, between federal and provincial and municipal initiatives, and between the public sector and the business community.

Recommendations cover a wide scope, with strong support for more quality, affordable child care spaces. Writers stress that the core component of quality child care is quality staff. Suggestions on staffing include better wages for child care workers, basic standards of staff screening and training, and improved job benefits such as group medical, dental, and disability insurance.

Views on facilities, however, vary considerably and include non-profit, profit, family child care, and group child care. Some suggested locations for centres include public schools, churches and the workplace.

Re-distribution of government funding is key to most of the recommended changes. A number of different solutions are proposed, with submissions advocating direct child care subsidies to: a) the centres, b) the parents in need or, c) the parents at home with children. Many writers express concern with the high cost of child care.

Areas of child care needs considered most pressing include:

- under 3 years child care;
- 7 day/week care with flexible hours; and,
- after school "latch-key" care.

A significant number of submissions stress the importance of recognizing and supporting the family unit. Mothers/fathers at home are seen as making a valuable contribution to the development of their children and to society as a whole, often with some financial sacrifice. In making their "career choice", parents at home should not be penalized by forfeiting tax benefits available to day care users.

Quality, affordable child care is the goal of all the submissions. Although recommendations may vary as to the means of achieving this level of service, the concerns and objectives are similar.

II. Priority Issues and Concerns

Issues and concerns in the submissions to the Task Force on Child Care focus on five priority areas: facilities, staff, programs/services, funding and support for parents at home. The following is a summary of the views expressed:

- **1) Facilities:**
  - more quality, affordable child care spaces
  - more Family Day Care spaces
  - involvement of private sector/business community
  - location at or near work place
  - linkage with public school system
  - simplification of licensing procedure
  - removal of municipal(bureaucratic) barriers
  - home-like environment
  - flexible hours
  - greater support from Licencing Officers for small day care centres
  - need for facilities in remote areas of Province
  - competition for space in churches makes single purpose use unlikely
- **2) Child Care Workers:**
  - basic standards of training
  - better wages
  - greater numbers trained
  - more ECE courses funded in post-secondary system

- benefits for family caregivers
- public/government recognition and support
- agency screening service for qualified babysitters
- criminal record check of care-givers
- appropriate liability insurance for caregivers

◆ **3) Programs and Services:**
- particular areas of need:
  - * under 3 years child care
  - * 7 days/week, flexible hours service
  - * integration of special needs children
  - * after school, "latch-key" care
  - * sick and emergency care
- cooperative efforts between government ministries, the three levels of government and the private sector
- coordinated public information on child care
- maternal and child health education/services
- systematic model for program evaluation
- funding for children for whom English is not their first language
- services which recognize special child care needs of rural and isolated communities
- services which recognize special short-term/ emergency care needs (with an inventory of care providers)
- flexible hours for parents who are students, shift workers, casual workers and part-time workers
- Regional District Resource Centres
- programs/services to reflect needs of each community
- design cities to be "family-friendly"
- out-of-school programs in local communities
- transportation to out-of-school programs not located in child's elementary school

◆ **4) Funding:**
- direct subsidies to centres
- assistance with capital costs of new facilities and equipment (these are not currently covered by BCHMC non-profit housing program)
- direct subsidies to parents in need (to give choice of child care)
- a stay-at-home parents' tax credit for families below a certain income level (Quebec precedent)
- financial support/tax credit for all parents at home
- rejection of universal, tax-funded child care system
- incentives to encourage corporate development of child care facilities
- assistance to single parents to upgrade employment skills
- no discrepancy between Group and Family Day Care subsidies
- an increase in subsidy levels
- assistance to private operators through low interest or deferred payment loans
- funding assistance for non-profit groups
- exemption of child care facilities from GST
- amendment of Industrial Relations Act and Employment Standards Act to make child care an employee benefit
- nanny and full child care costs as legitimate tax deductible expenses
- no forced employment of parents on welfare
- increased subsidy levels and cut off levels so recipients can remain above poverty line
- simplified subsidy application process

◆ **5) Support for Parents at Home:**
- recognition of child care as a family issue (not a "women's issue"), with everyone bearing some responsibility
- recognition of parenting as a career choice
- financial support through tax incentives, extensions of maternity/paternity leave, more sick days for parents, job sharing, job flexibility
- equal tax credits to all mothers/parents, whether in the paid labour force or at home

III. Organizations and Individuals Sending Written Submissions

◆ **Organizations:**

Abracadabra Childcare, Chilliwack
Ad Hoc Inter-Church Coalition on Child Care, Vancouver
Anglican Synod of the Diocese of B.C., Vancouver
B.C. Division of Early Childhood of the Council for Exceptional Children
B.C. School Trustees' Association
British Columbia Cancer Agency, Vancouver Clinic
British Columbia Women's Institute, Abbotsford
Canadian Society for Information Children, Burnaby
Catholic Archdiocese of Vancouver
Children's Challenge Daycare, Kamloops
Citizens for Public Justice, Vancouver
Comox Valley Children's Day Care Society
Concerned Professional Childcare Providers Inc., North Vancouver
Corporate Share Care
Corporation of the City of North Vancouver
Corporation of the District of North Vancouver
Cranbrook Boys' and Girls' Club
Cranbrook Women's Resource Society
Early Childhood Education Committee, Fraser Valley College
Early Childhood Educators, Mission
Early Childhood Educators of B.C.
Early Childhood Education Program, College of New Caledonia, Prince George

End Legislated Poverty
Entre Nous Femmes Housing Society, Vancouver
Individual Options Program, Mission
Jewish Federation of Greater Vancouver - Social Planning Committee,
"Kate's House" Family Daycare, White Rock
Kids First, Delta
Langley School District 35
Pacific Child Care Society, Nanaimo
Parents and Caregivers Together for Daycare (P.A.C.T.), Chilliwack
Revelstoke Community Futures Society
Royal Oak Women's Institute
School of Child and Youth Care, University of Victoria
7-Eleven Food Stores, Burnaby
St. Mary's Band Administration, Cranbrook
Simon Fraser University Student Society
United Church of Canada, Victoria Presbytery
Vancouver General Hospital
Vancouver Neurological Centre
Vancouver Y.M.C.A.
West Vancouver School Board
Westcoast Child Care Resource Centre, Vancouver
Western Canada Family Day Care Association of B.C.
Women's Institute, Bulkley-Tweedsmuir District, Smithers

◆ **Individual Submissions:**

Adams, Shirley - Kamloops
Atkinson, Frances - Burnaby
Bailey, Gordon - Vancouver
Barber Bowman, Julie - Port Moody
Bender, June - Burnaby
Campbell, Marlene - Kamloops
Carr, Ann - New Westminster
Carsted, Helen - Duncan
Clarke, Dr. Theresa - Surrey
Cook, Jack - White Rock
Cristall, Maureen - Dawson Creek
Demer, J. - Langley
Dorval, Kathie - Victoria
Draper, Loretta - Maple Ridge
Fennell, Lee - Vernon
Frost, Lee - Vancouver
Furk, Margo
Futrell-Fruhling, K. - Vancouver
Goldberg, Dianne - Vancouver
Gregson, Ian - Burnaby
Grierson, C. - Langley
Hanna, Nora - Victoria
Harder, Louise & Ian - Vancouver
Hermsen, Randy - Burnaby
Hickin, Elaine - North Vancouver
Hill, John - Victoria
Hoff, Kees - Vancouver
Horbachuk, Marvella - Surrey
Iannidinard, Lori - Cobble Hill
Jack, Kathy; Sanford, L.; Wright, S. - Mission
Johnstone, Donna - North Vancouver
Jones-Lamont, Diann - Langley
Joyce, J. - North Vancouver
Kirk, Vicki - New Westminster
Knox, Colleen - Port Coquitlam
Kolper, Waldtraut - North Vancouver
Krieg, Hilda - Surrey
Kristos, B. - Burnaby
Kuttner, L. - Burnaby
Lawson, K. - Prince George
Leduc,Anna - Halfmoon Bay
Leduc, Penny - Pritchard
Leja, A.M. - Mission
Les, Janet - Chilliwack
MacDougall, Diane - Burnaby
Marquis, G. - Vancouver
Maunder, Deborah - Victoria
McConville, James - New Westminster
McKamey, Sheryl; Biero, Pamela - Mission
McMullen, Terry - Surrey
Mellship, Kaye - Vancouver
Mosher, Dale - Victoria
Norton, Trudy - Coquitlam
Patterson, Serena - Burnaby
Peachy, Sharon - Burnaby
Pincombe, Shurli - Burnaby
Pohl, Christine - Chilliwack
Postma, Hazel - Port Coquitlam
Robinson, L. - Burnaby
Russell, Susan - Langley
Salway, J. Marie - Sooke
Stanford, Mr. & Mrs. H. - Langley
Stockall, Heather - North Vancouver
Storey, Monica - Chilliwack
Storey, Stephanie - Chilliwack
Szirony, C. - Chilliwack
Timofee, Carol - Mission
Ullmann, Elaine - Chilliwack
Walker, P.J.- Chilliwack
Wall, Karen - Burnaby
Watt, Alison - North Vancouver
Wong, Mr. & Mrs. J. - Vancouver
Woods, Sue - Burnaby
Wyper, Irene - Langley

◆ **Petitions**

Early Childhood Educators in Mission
Professional Childcare Providers Incorporated
Petition to MLA Jack Davis, North Vancouver - Seymour

January 29, 1991

◆

APPENDIX C

PROVINCIAL CHILD CARE INFORMATION SHEETS

The sources for the information contained in the Provincial Child Care Information sheets are:

1. Published documentation from each province and territory; and,
2. Child Care Information Sheets, Centre for Urban and Community Studies of Toronto, Toronto, 1990.

The information is correct to November 30, 1990.

Provincial Childcare Information Sheets

ALBERTA

LEGISLATION
Social Care Facilities Act, 1980.
Day Care Regulations, 1981.

ADMINISTRATION
Ministry of Family and Social Services

MANDATE
"to promote increased participation in the economic life of the province by families with children"

PROGRAMS
The following government funded programs for childcare were established in Alberta in 1980. Reforms announced in March 1990 will redirect funding over the next four years from the Operating Allowance Program to the Child Care Subsidy Program.

- MONTHLY OPERATING ALLOWANCE - TO CENTRES
  Paid to childcare centres. Rate per enrolled child.

CHILD'S AGE	CURRENT	11/1/90	7/11/91	7/1/92	7/1/93	7/1/94
0-12 mo	$257	$257	$200	$150	$100	$50
13-18 mo	257	190	160	110	80	50
19-35 mo	131	110	110	100	70	50
3-4.5 yr	78	78	78	78	60	50
+4.5 yr	65	65	65	65	55	50

- MONTHLY ADMINISTRATIVE FEE - TO FAMILY DAYHOME AGENCIES
  Paid to family dayhome agencies who contract with the Ministry to recruit, train and supervise individual dayhome providers, collect fees and pay providers. Fee per child.

CHILD'S AGE	FEE PER CHILD TO AGENCY
0-35 mo	$103
1-5 yrs	65

- CHILD CARE SUBSIDY - TO OPERATORS FOR LOW INCOME FAMILIES
  Payable to government approved facilities only. Currently families with gross annual incomes up to $24,638 may be eligible for maximum subsidy depending on family size, income and age of children. Eligibility level and subsidy amount will increase as Operating Allowance decreases so that by 1994 maximum subsidy may be available to families with gross annual incomes up to $48,000.

- INTEGRATED DAYCARE
  A special allowance is paid to facilities to assist with the costs of integrated care for special needs children.

ALBERTA GOVERNMENT EXPENDITURES - CHILDCARE PROGRAMS - 1988/89

Operating Allowance	
$1,318/child for 24,500 children	- Total $32.3m
Administrative fee	
$855/child for 5,500 children	- Total $ 4.7m
Subsidy	
$1,907/child for 12,900 children	- Total $24.6m
Integrated Daycare	
$4,250/child for 400 children	- Total $1.7 million
TOTAL CHILDCARE BUDGET 1988/89	$63.3 MILLION

NUMBER OF LICENSED SPACES

Child care centre spaces	32,652
Family dayhome spaces	6,029
Total	38,681

NUMBER OF PROVINCIAL INSPECTORS
28

AUSPICES (estimates only)
Non-profit 25% Profit 75%

ALBERTA CHILDCARE STANDARDS AND REGULATIONS
(as of November 1,1990)

- FAMILY DAYHOMES
  - exempt if 3 children or less
  - maximum capacity 6 children under 7 years
  - no more than 3 under 3 years or 2 under 2 years

- CENTRES

AGE GROUPS	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
0-12 mo	1:3	6
13-18 mo	1:4	10
18-35 mo	1:6	10
3-4 yrs	1:8	16
5 yrs	1:10	20

- TRAINING
  None required to operate a family dayhome.
  Centre care - by September 1,1995 all day care centre

Continued on next page

directors will have training equivalent to a 2-year community college diploma in ECE. By September 1, 1992, one in six workers in each centre will be required to have training equivalent to a 1-year community college certificate in ECE. By September 1, 1994, that ratio will increase to one in five and, by September 1, 1995, to one in four.

MUNICIPAL ROLE

Alberta is one of three Canadian provinces in which municipalities have a legislated role. Until 1980, municipalities in Alberta paid 20% of the cost of subsidized care. In 1980, the province took over full funding of subsidies and implemented the grant programs. Today, the municipalities are responsible only for school-age child care programs.

Provincial Childcare Information Sheets

SASKATCHEWAN

LEGISLATION
An Act to Promote the Growth and Development of Children and to Support the Provision of Child Care Services to Saskatchewan Families, 1990
Child Care Regulations, 1990

ADMINISTRATION
Department of Social Services, Child Care Branch

MANDATE
" it is deemed advisable to promote the growth and development of daycare services for children, and to provide or support these services to ensure their availability to all families in Saskatchewan who need them"

PROGRAMS
The following programs were established in 1981:

- START-UP FUNDS

To Centres (non-profit centres only)	$600 / space
To Family Daybomes	$200 / home
Family Daybomes in the North	$300 / home

- MONTHLY OPERATING GRANT - TO CENTRES
  $20 / month / daycare space (non-profit centres only)
  Additional $20 / month / space for Northern centres
- ANNUAL OPERATING GRANT - TO FAMILY DAYCARE PROVIDER
  $50 / full-time child space / year
- ANNUAL EQUIPMENT GRANT - TO CENTRES
  $100 / year / day care space provided (North only?)
- CHILD CARE SUBSIDY - FOR LOW INCOME FAMILIES
  Saskatchewan has had the most generous income limits. Families of four with gross annual incomes of up to $20,868 are eligible for maximum subsidy. Payable for use at government approved facilities, subsidies equal 90% of the fee charged or $235 per month which ever is less.
- SPECIAL NEEDS GRANTS - FOR CENTRES OR FAMILY DAYHOMES
  Operating Grants
  - $200 / mo / special needs child enrolled
  Equipment Grants
  - $ 50 / mo / special needs child enrolled
  - $100 / mo for exceptional cases

NUMBER OF LICENSED SPACES

Child care centre spaces	3,735
Family daybome spaces	1,842
Total	5,577

NUMBER OF PROVINCIAL INSPECTORS
12

AUSPICES
Non-profit 97% Profit 3%

SASKATCHEWAN GOVERNMENT EXPENDITURES - CHILDCARE PROGRAMS - 1988/89

Total government expenditures	$10,935,014
Federal expenditures: CAP	5,248,807
Provincial expenditures	6,686,207

SASKATCHEWAN CHILDCARE STANDARDS AND REGULATIONS

- FAMILY DAYHOMES
  - maximum capacity 8 children (6 weeks to 12 years) including provider's own
  - no more than 5 under 6 years or 2 under 30 months.
- CENTRES

AGE GROUPS	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
18-30 mo	1:5	no regs
30-6 yrs	1:10	"
5 -12 yrs	1:15	"

- TRAINING
  None required to operate a family daybome.
  Centre care - All staff must have either the prescribed early childhood training or an accepted equivalent. Those working with special needs children must have additional training.
- PARENTAL INVOLVEMENT
  Centres are administered by Boards, of which 51% are parents using the facility.

MUNICIPAL ROLE
There is no legislated municipal role in Saskatchewan.

Provincial Childcare Information Sheets

MANITOBA

LEGISLATION
The Community Child Day Care Standards Act, 1983
Child Day Care Regulation, 1986

ADMINISTRATION
Department of Family Services, Child Day Care Branch

MANDATE
"provides financial assistance in the form of grants and subsidies to licensed non-profit day care centres and day homes"

PROGRAMS
The following programs were established prior to 1985:

- START-UP GRANTS
  To Centres

- Full-time daycare	$450 / space
- Nursery School	238 / space
- School Age	450 / space
- Special Needs	541 / space
To Family Day Care	$300 / space

- OPERATING GRANTS
  FOR INFANTS

- Centres	$6.50/child/day
- Family	2.20/child/day

  FOR MAINTENANCE

- Centres	$940/space/year
- Family	180/space/year
- Group Dayhome	352/space/year
- Nursery (1-6 sessions/wk)	238/space/year
- Nursery (6-10 " / ")	470/space/year
- School-Age	470/space/year

  FOR AUDIT

- Centres	$1000/centre/year
- Family	nil
- Group Dayhome	708/centre/year
- Nursery	708/centre/year
- School-Age	1000/centre/year

  FOR STAFF SALARY ENHANCEMENT

- Centres	$1300/trained worker/year
- Nursery	1300/ " "
- School-Age	1300/ " "

  Note: Once-only grants are also available for Fire Upgrading or Physical Upgrading (maximum $3000 per centre)

- CHILD CARE SUBSIDY - TO LICENSED FACILITIES FOR LOW INCOME FAMILIES
  Payable to licensed day care centres and homes on behalf of eligible families. The rates that facilities may charge for subsidized care are set by the government and are for a 12 hour day, $17.70/day for infants, $14.75/day for preschoolers and $13.20/day for school-age children. There is a minimum user fee of $260/year. In 1989, a family of four with a net annual income of $17,473 was eligible for full subsidy and could be partially subsidized to a net annual income level of $34,061.

- GRANTS FOR CHILDREN WITH DISABILITIES
  Start-up, staffing and specialized grants exist to assist centres in integrating children with disabilities into their care. To be eligible for a grant, centres submit a current assessment of a child which has been prepared by a qualified referring agency.

MANITOBA GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1988/89

Total government expenditures	
Grants and subsidies	$30,780.8
Federal Expenditures:	
CAP	12,400.2
Provincial Expenditures:	
Subsidized care	14,700.4
Maintenance grants	7,449.9
Start-up/Incentive grants	267.3
Children with disabilities	1,103.7
Other	7,259.5

NUMBER OF LICENSED SPACES - 1988/89

Child care centre spaces	14,347
Family dayhome spaces	2,292
Total	16,639

NUMBER OF PROVINCIAL INSPECTORS
30

AUSPICES (estimate only)
Non-profit 88% Profit 12%

MANITOBA CHILDCARE STANDARDS AND REGULATIONS

- FAMILY DAYHOMES
  Two types of licensed family care. Family day care homes - up to 8 under 12 years. Maximum of five under five and three under two. Group daycare homes - 8 to 12 children, no more than 3 under 3 years, 2 providers.

- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
12wks-1yr	1:3	6
1 - 2	1:4	8
2 - 3	1:6	12
3 - 4	1:8	16
4 - 5	1:9	18
5 - 6	1:10	20
6 - 12	1:15	30

- TRAINING

Two thirds of centre staff must have either a certificate from an approved program or a diploma or degree. Parent Involvement - Only centres operated with Boards of which 20% of the members are current parents are eligible for grants. All licensed facilities must have either Boards of Directors or Parent Advisory Committees.

Provincial Childcare Information Sheets

ONTARIO

LEGISLATION
Day Nurseries Act, 1980
Ontario Regulation 760/83

ADMINISTRATION
Ministry of Community and Social Services

MANDATE
"Commitment to building a comprehensive child care system that will meet the needs of all citizens; a system that would move child care from a welfare connotation towards one of public service."

PROGRAMS
Ontario revamped its child care support programs in 1987 with the 1987 report entitled "New Directions for Child Care".

- CAPITAL FUNDING
  80% Provincial 20% Community
  To non-profit programs only
- OPERATING GRANTS
  Direct operating grants are based on a funding formula and differ from program to program. An evaluation of the first year showed that 85% of the public expenditure went to augment salaries and benefits and 15% was used for non-salary purposes. Average wage increase for staff in non-profit centres was 18% and in private centres was 12%. Estimate of the average daily grant to centres and family daybome agencies is:
  all ages $3/space
- OTHER
  A variety of other programs exist including: Incentive grants for new models, employment opportunities funding and special needs funding.
- SUBSIDY
  Ontario is the only province to use a needs test although work is under way to introduce incomes test to determine eligibility. Maximum subsidy available per child is $998/month and a family of four may earn up to $20,235 to be eligible for maximum subsidy.

ONTARIO GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1988/89

Subsidies (est)	$191.0 million
Direct Operating Grants	$62.6
Capital Funding	10.4
Other	3.0
Total provincial expenditures	$267.1 million

NUMBER OF LICENSED SPACES - 1988/89

Child care centres	103,227
Family daycare spaces (est)	12,196
Total	115,423

NUMBER OF PROVINCIAL INSPECTORS - 1988/89
56

AUSPICES
Non-profit 51% Commercial 38% Municipal 11%

ONTARIO CHILD CARE STANDARDS AND REGULATIONS

- FAMILY DAYHOMES
  Up to five children under 12, no more than 2 under 2 years or 3 under 3 years. Agencies that support and supervise home care providers are licensed under the Day Nurseries Act.
- CENTRES

AGES	STAFF/CHILD RATIO	MAXIMUM GROUP SIZE
under 18 mo.	3:10	10
18 - 30mo.	1:5	15
2 - 3	1:6	12
31mo. - 5	1:8	16
5 - 6	1:12	24
6 - 9	1:15	30

- TRAINING
  Child Care Supervisors must have 2 year ECE diploma or equivalent. There must be one Supervisor per group of children as noted above.
- PARENT INVOLVEMENT
  Services must have a written statement about same.

MUNICIPAL ROLE
The Ontario municipalities and Indian Bands may directly operate child care services under the Day Nurseries Act. They also pay 20% of the cost of child care subsidies.

Provincial Childcare Information Sheets

QUEBEC

LEGISLATION

An Act Respecting Child Day Care, 1979
Quebec Regulation 115/44

ADMINISTRATION

L'Office des Service de Garde a l'Enfance. Created in 1980, l'Office is a semi-autonomous body whose responsibilities and composition are defined by provincial child care legislation. The membership of l'Office includes 51% parent child care users and its powers are administrative, regulatory and legal.

MANDATE

" *to facilitate greater reconciliation between the family and the professional responsibilities of parents. ..... support the efforts of women to attain financial autonomy. ...* "

PROGRAMS

Many of the following programs were established as early as 1974.

- CAPITAL FUNDING

Project management	$5000.00 maximum
Start-up	
Set up	$50,000.00 maximum
Other costs	$700.00/space

- OPERATING GRANTS

For infants less than 18 months	$ 5.75 /space /day
For all other preschool children	$ 4.50 /space /day

- HOUSING GRANTS

For 50% of costs (utilities,rent) $9,000.00 /centre /year

- INTEGRATION OF SPECIAL NEEDS CHILDREN

For individual case study	$300.00 /case study
For special equipment	$1,500.00 /child
For operating costs	$14.00 /child /day

- SUBSIDIES

The financial assistance program to assist parents with child care costs has recently been modified so that assistance to parents is awarded according to the day care fee rather than a fixed rate. Maximum financial assistance will be awarded in the most advantageous of two ways; $10.50 per child per day or 40% of the day care fee plus a basic amount of $4.75 per child per day. The intent of this change is to increase the assistance to families whose incomes range between $22,000 and $25,000 per year, but families with incomes to $50,000 may get some assistance.

- OTHER

The Quebec government also provides grants to; agencies that coordinate the provision of home day care; incentive grants for school age child care; grants for staff training and upgrading; grants for pilot projects for flexible models.

NOTE: In 1988, the Quebec government released its new policy statement, "A Better Balance: Policy Statement on Daycare Services" in which they propose some funding changes specifically around the manner in which operating grants are delivered.

QUEBEC GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1989/90

Child Care Expense Deduction (1988)	$34,000,000
Subsidies	50,941,700
Operating Grants	56,385,400
Start-up and Incentive Grants	2,626,500
Special Needs	983,000
Administration	6,067,400
Other	4,816,800
Total Provincial Expenditures	$155,820,900
Federal Expenditures (CAP)	$35,660,700

NUMBER OF LICENSED SPACES - 1990

Child Care Centre spaces	41,810
Family Day care spaces	6,556
School-Age Child Care spaces	24,480
Total	72,846

NUMBER OF PROVINCIAL INSPECTORS

11

AUSPICES

Non-profit parent controlled	44%
Non-profit other	3%
Commercial	16%
School Board	37%

QUEBEC CHILD CARE STANDARDS AND REGULATIONS

- FAMILY DAYHOMES

A provider, supervised by an agency, may care for up to 6 children including her own, of which no more than 2 may be under 18 months. If the provider is aciated by another adult, they may care for up to 9 children of which no more than 4 may be under 18 months.

- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
0 - 18 mo.	1:5	15
18mo.- 5 Yrs.	1:8	30
6 - 12	1:15	30

- TRAINING
  One third of child care centre staff must have a college or university degree in ECE.

- PARENT INVOLVEMENT
  The Boards of non-profit organizations must include at least 51% parent members. Commercial programs must have a parent committee.

MUNICIPAL ROLE

Legislation allows a municipality to operate child care facilities and to receive subsidies; however, in 1990 only 90 spaces were municipally run.

Provincial Childcare Information Sheets

NEW BRUNSWICK

LEGISLATION
Child and Family Services and Family Relations Act, 1980
New Brunswick Regulations 83-85

ADMINISTRATION
Department of Health and Community Services

MANDATE
In December 1989, the Office of Childhood Services was established . As part of its mandate, it is to develop a policy framework for children's services in N.B. of which child care is a part.

PROGRAMS

- OPERATING GRANTS
  $13.55 / approved space /month
- PROFESSIONAL DEVELOPMENT GRANT
  $75 /primary staff member /year
- SPECIAL NEEDS GRANT
  $400 /identified child /year
- SPECIAL PROJECTS
  - no description of program available
- SUBSIDY
  A family of four is eligible for the maximum daily subsidy up to a net monthly income of $1,015. The maximum daily subsidy for children under the age of two is $14/day, for children 2 - 6 is $12/day and for school-age children is $7/day.

NEW BRUNSWICK EXPENDITURES - CHILD CARE PROGRAMS - 1988/89

Operating Grants	$ 401,900
Professional Development Grants	89,200
Special Needs	212,700
Special Projects	93,300
Subsidy	1,905,700
Total Provincial Expenditures	$2,652,800
Federal Expenditures (CAP)	$1,320,000

NUMBER OF LICENSED SPACES - 1990

Child Care Centre Spaces	6,510
Family Dayhome spaces	96
Total	6,606

NUMBER OF PROVINCIAL INSPECTORS
5

AUSPICES
Non-profit 53%
Commercial 47%

NEW BRUNSWICK CHILDCARE STANDARDS AND REGULATIONS

- FAMILY DAYCARE
  Care in a private residence, regulated directly by the Province, for a maximum of 6 children, including those of the operator, up to three of which may be infants.
- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
less than 2 yrs	1:3	9
2 years	1:5	10
3 "	1:7	14
4 "	1:10	20
5	1:12	24
6	1:15	30
7 - 12 yrs	1:15	30

- TRAINING
  No ECE training or experience required. Staff must be at least 16 years old but those under 19 years must be supervised by a primary staff member who must be over 19 years.
- PARENT INVOLVEMENT
  Not less than 25% of the members of the Board of Directors of a non-profit centre shall be parents of enrolled children.

Provincial Childcare Information Sheets

NOVA SCOTIA

LEGISLATION
Day Care Act and Regulations, 1989

ADMINISTRATION
Department of Community Services

MANDATE
A Round Table on Day Care is currently reviewing all components related to daycare in Nova Scotia.

PROGRAMS

- START-UP GRANTS
  A once only grant of $100 per subsidized space
- OPERATING GRANTS
  $15.25 /day /licensed space
- EQUIPMENT GRANTS
  A grant which may be applied for annually, and which is paid in one installment based on $130 /year /subsidized space.
- SPECIAL NEEDS FUNDING
  To assist with the integration of special needs children, a differential funding fee is available. The 1990 rate is $21/day /special needs child. This is increased annually using C.O.L.A.
- CHILD DEVELOPMENT CENTRE GRANT
  Annual grants are provided to non-profit programs approved as child development centres, usually part-day, part-week programs operated in rural areas. Maximum grant available cannot exceed 50% of the centres approved operating budget and is based on the percentage of families whose income falls within provincial guidelines.
- STAFF TRAINING GRANT
  Grants are available to individuals working in licensed centres to assist them to meet minimum training requirements for ECE. The current rate is 50% of the cost of a course to maximum of $300 annually.
- SALARY ENHANCEMENT GRANTS
  Provided to facilities to improve staff salaries/benefits and increase caregiver payments. Currently $520 per year per licensed space
- SUBSIDY
  A family of four may have a net income level of $13,960 and receive maximum subsidy of $14 per day. They are however, expected to pay a user fee of $1.25 per day.

NOVA SCOTIA GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1988/89

Administration	$ 315,700
Grants and Assistance	
Child Development Centres	198,000
Equipment Grants	237,700
Subsidy	6,665,000
Total	$7,416,400
Federal Expenditures (CAP)(est.50%)	$3,708,200

NUMBER OF LICENSED SPACES - 1989
Total licensed spaces 9,968

NUMBER OF PROVINCIAL INSPECTORS
11 (part-time)

AUSPICES
Non-profit 57% Commercial 42%

NOVA SCOTIA CHILD CARE STANDARDS AND REGULATIONS

- FAMILY DAYCARE
  Not covered by legislation, but there are two agencies authorized by the provincial government to supervise family daycare homes.
- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
0 - 2	1:4	none
0 - 5	1:7 (full-day)	none
	1:12(part-day)	none
5 - 12	1:15	none

- TRAINING
  All staff must have first-aid knowledge and the director and 2/3 of the staff must be trained either with ECE or have two years experience and one course and a 25 hour workshop covering growth, development and curriculum.
- PARENT INVOLVEMENT
  Boards of non-profit facilities may include persons from the community, Parents or guardians of enrolled children and staff. No single group shall constitute a majority.

MUNICIPAL ROLE
Legislation allows municipalities to apply for a license to directly operate a child care facility. (None have done so to date.)

Provincial Childcare Information Sheets

PRINCE EDWARD ISLAND

LEGISLATION
Child Care Facilities Act, 1988
Child Care Facilities Regulations, 1988
Welfare Assistance Act, 1988

ADMINISTRATION
Department of Health and Social Services

MANDATE
"This government sees good child care as a way to strengthen the family unit by relieving some of the pressures brought about by recent social and economic change."

PROGRAMS
"The purpose of the Direct Funding Program is to provide licensed child care facilities with financial support in order to enhance and maintain the quality of the program being offered."

- MAINTENANCE GRANTS
  $1 /day /space, paid on a quarterly basis, to centres that offer full-day programs. The intent of the grant is to enhance salaries. The government establishes salary levels for staff. Those centres paying staff less than the government level must spend 80% of the maintenance grant on salaries, 10% on equipment and 10% on operating costs.

- FLAT RATE GRANTS - FAMILY DAY CARE
  An annual grant of $500 is available for each licensed family day care home. In order for the provider to be eligible for the grant, (s)he must have completed the necessary training and possess a certificate.

- FLAT RATE GRANTS - KINDERGARTEN/NURSERY SCHOOL
  Annual grants are also available to half-day kindergarten and nursery school programs at the following levels:
  12 children or less — $ 750
  24 children or less — 1,200
  50 children or less — 2,000

- FLAT RATE GRANTS - SCHOOL-AGED CARE
  An annual grant is available for School-Age Child Care Centres, calculated on months of operation and number of children served. Maximum annual grant is $2,000. No less than 40% of the grant is to be spent on salaries. No more than 10% of the remaining balance for equipment is to be spent on consumable supplies (paper, paint, etc.).

- INFANT INCENTIVE GRANT
  Any licensed facility which registers at least one child younger that 2 years old, on a regular basis for at least six months, is eligible for an annual grant of $250.

- SPECIAL NEEDS GRANT
  Established to encourage integration, centres may apply for funds for wages for additional staff to provide individualized programming for the special needs children. Grant will cover wages up to $10.82 /hour.

- SUBSIDY
  Based on an income test under review.

P.E.I. GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1989/90

Operating Grants	$333,227
Administrative Grants	4,200
Subsidy	824,112
Special Needs	348,373
Administration Costs	104,830
Total Provincial Expenditure	$1,614,742
Federal Expenditure (CAP)	$ 669,688

NUMBER OF LICENSED SPACES IN 1989/90

Child Care Centre spaces	1,457
Family Day Care spaces	35
School-age care spaces	375
Occasional spaces	183
Kindergarten/nursery school spaces*	1,584
Total	3,634

Note: Kindergarten is not provided by the Public Education system

NUMBER OF PROVINCIAL INSPECTORS
N/A

AUSPICES
N/A

P.E.I. CHILDCARE STANDARDS AND REGULATIONS

- FAMILY DAYCARE
  Care for up to 7 children in the home of a provider who has met training requirements.

- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
0 - 2	1:3	6
2 - 3	1:5	10
3 - 5	1:10	30
5 - 7	1:15	36

- TRAINING
  At least one full-time staff member in each program must have ECE plus experience. Others must undertake 30 hours of training every two years.

Provincial Childcare Information Sheets

NEWFOUNDLAND & LABRADOR

LEGISLATION
An Act Respecting Day Care and Homemaker Services, 1975 amendments to 1988
Newfoundland Regulation 219/82

ADMINISTRATION
Department of Social Services

MANDATE
"..built on a philosophy which recognizes the inherent value of the family and the importance of its child rearing responsibilities. It recognizes as well the changing modern environment which families confront, in particular the diminishing supportive role played by extended family members"

PROGRAMS

- START-UP GRANTS
  Once only grant of $1000 can be received by a preschool or day care upon licensing.
- EQUIPMENT GRANT
  Full-time programs are eligible for an annual grant for equipment calculated on $.20 /space /day
- SUBSIDY
  A family of four with a net annual income of $19,320 is eligible for full subsidy of $360 per month

NEWFOUNDLAND GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1988/89

Subsidy program	$1,923,500
Grant program	87,900
Total	$2,011,400
Federal share (CAP)	$ 880,500

NUMBER OF LICENSED SPACES - 1989
1,863

NUMBER OF PROVINCIAL INSPECTORS
There are 4 social workers assigned.

AUSPICES
Commercial 82%
Non-profit 18%

NEWFOUNDLAND CHILD CARE STANDARDS AND REGULATIONS

- FAMILY DAY CARE
  Homes caring for more than four children are licensed as centres.
- CENTRES
  Staff/child ratios 2 - 3 years 1:6, 3 - 6 years 1:8, 7 - 12 years 1:15. No maximum group size, although 2 rooms are needed if more than 25 children are present. Max centre size is 50.
- TRAINING
  One staff person is to have had minimally 1 year of supervised work experience with pre school children and/or training in a related field.

Provincial Childcare Information Sheets

NORTHWEST TERRITORY

LEGISLATION
An Act Respecting Child Day Care Facilities 1987
The Child Day Care Standards and Regulations 1987

ADMINISTRATION
Department of Social Services

MANDATE
N/A

PROGRAMS
Limited details available.

- CAPITAL AND START-UP
  Available to non-profit programs only.
- OPERATING GRANTS
  Available to non-profit programs only.
- SUBSIDIES
  Families of four with net income levels of up to $3501 are eligible for subsidies up to 100% of the cost of care.

N.W.T. GOVERNMENT EXPENDITURES - CHILD CARE PROGRAMS - 1988/89

Territorial Expenditures	
Subsidies Care	$1,200,000
Operating Grants	443,000
Start-up/Repair	400,000

NUMBER OF LICENSED SPACES - 1989

Child Care Centre Spaces	684
Family Day Care Spaces	68
Total	752

NUMBER OF TERRITORIAL INSPECTORS
2

AUSPICES

Non-profit	73%
Commercial	27%

N.W.T. CHILD CARE STANDARDS AND REGULATIONS

- FAMILY DAY CARE
  No more than 8 children including provider's own. No more than 6 under 6 years or 3 under 3.
- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
12wks - 2 yrs.	1:4	8
2 - 5 yrs.	1:8	16
6 - 12 yrs.	1:10	30

- TRAINING
  Encouraged but not required.
- PARENT INVOLVEMENT
  Non-profit programs are required to have a board of directors that is at least 51% parents. Family day care and commercial programs must establish parent involvement activities.

Provincial Childcare Information Sheets

YUKON

LEGISLATION
Child Care Act, 1990
Family Day-Home Regulations and Day Care Centre Regulations 1986

ADMINISTRATION
Department of Health and Human Resources

MANDATE
Based on a set of seven principles.

PROGRAMS

- CAPITAL FUNDS
  Available to non-profit societies upon application.
- OPERATING GRANTS
  To non-profit societies
  $60 /space /month for each child 0 - 18 months
  $60 /space /month for each special needs child
  $40 /space /month for each child 18mo - 6yr.
  To family dayhomes
  $750 per year
- SALARY ENHANCEMENT GRANTS
  $.60/hour for trained workers
  $.40/hour for untrained workers
- SUBSIDY
  A family of four in Whitehorse with a net income level up to $2094 is eligible for full subsidy of $350/ month for preschoolers and $450/month for infants or special needs.
- OTHER GRANTS
  Grants are also available for renovation, toys and equipment.

YUKON EXPENDITURES - CHILD CARE PROGRAMS - 1989/90
Federal and Territorial expenditures $2,300,000

NUMBER OF LICENSED SPACES - 1989/90

Child Care Centre spaces	647
Family Dayhome Spaces	88
Total	735

NUMBER OF LICENSING INSPECTORS
3

AUSPICES

Non-profit	62%
Commercial	28%

YUKON CHILD CARE STANDARDS AND REGULATIONS

- FAMILY DAYCARE
  No more than 4 infants, no more than 6 preschoolers when 3 are infants, no more than 8 preschoolers when none are infants
- CENTRES

AGES	STAFF/ CHILD RATIO	MAXIMUM GROUP SIZE
0 - 18mo.	1:4	–
18mo - 2 yrs.	1:6	–
3 - 6 yrs.	1:10	–
6 - 12 yrs.	1:12	–

  Group and centre sizes not specified.
- TRAINING
  No ECE training required

APPENDIX D

PROVINCIAL AND TERRITORIAL COMPARISONS

TABLE 1: CAPITAL FUNDING AND START-UP GRANTS

TABLE 2: OPERATING GRANTS

TABLE 3: SUBSIDIES TO LOW INCOME FAMILIES

TABLE 4: CHILD CARE PROGRAMS FOR ABORIGINAL CHILDREN

TABLE 5: CHILD CARE PROGRAMS FOR CHILDREN WITH SPECIAL NEEDS

TABLE 6: MAXIMUM NUMBER OF CHILDREN - LICENSED FAMILY DAY CARE

TABLE 7: MAXIMUM NUMBER OF CHILDREN - UNLICENSED CARE

Sources for the information in the following tables are :

1) Information received from the Ministry responsible in each Province and Territory.

2) Child Care Information Sheets, The Centre for Urban and Community Studies, University of Toronto, 1990.

TABLE 1:
PROVINCIAL AND TERRITORIAL CHILD CARE FUNDING PROGRAMS -
CAPITAL FUNDING AND START-UP GRANTS

November, 1990

PROVINCE	CAPITAL FUNDING	START-UP	COMMENTS
B.C.	Application may be made to Lottery Fund for 1/3 of cost after 2/3 have been raised.	Up to $10,000 per centre	Non-profit centres only
ALBERTA	None	None	
SASKATCHEWAN	None	CENTRES - $600/space FAMILY DAYHOMES - $200/home $300/home	Non-profit centres only Central Sask. North only
MANITOBA	None	CENTRES - $450/space FAMILY DAYHOMES - $300/space	Non-profit centres only
ONTARIO	80% Provincial 20% Community		Non-profit centres only
QUEBEC	$5,000/project management $50,000/project $600/space if a municipal centre	CENTRES - $100/space $100/space $300/space $200/space HOME DAY CARE AGENCIES $2,000/project	Non-Profit only For Start up For Opening Costs For Equipment Costs For Operating Costs
NEW BRUNSWICK	None	None	
NOVA SCOTIA	None	CENTRES - $100/space FAMILY - $100/space	Non-profit centres only Per subsidized space only
P.E.I.	None	None	
NEWFOUNDLAND	Short term loans available through Rural Incentive Loan Program for rural centres only	$1,000/centre	Regardless of auspices
YUKON	Capital Funds available upon application.		Non-profit
N.W.T.		Available (No details)	

TABLE 2:
PROVINCIAL AND TERRITORIAL CHILD CARE FUNDING PROGRAMS – OPERATING GRANTS

November 1990

PROVINCE		$/DAY	$/MO	$/YR	COMMENTS
B.C.	There are no ongoing operating funds to providers; however, non–profit programs may apply for grants to assist with emergency repair or relocation (maximum $5,000).				
ALBERTA	CENTRES:		Per Child		To both Profit
	0–12 mo	–	$195	$2,340	and Non–profit
	13–19 mo	–	195	2,340	programs.
	20–36 mo	–	120	1,440	
	3–4.5 yrs	–	78.50	942	
	4.6–6 yrs	–	65	780	
	FAMILY DAYHOMES		Per Child		
	0–3.5 yrs	–	$103	$1,236	
	3–5 yrs	–	65	780	
SASKATCHEWAN	CENTRES:		Per Space		To Non–profit
	all ages	–	$20	$240	Centres only
	FAMILY DAYHOMES				
	all ages	–	–	$50	
MANITOBA	FOR INFANTS				To Non–profit
	Centres	$6.50/child	–	–	Centres Only
	Family	2.20/child	–	–	
	FOR MAINTENANCE				
	Centres	–	–	$940/space	
	Family	–	–	180/space	
	Group Dayhome	–	–	352/space	
	Nursery	–	–	238/space	
	and				
	School Age	–	–	470/space	
	FOR AUDIT				
	Centres	–	–	$1,000/centre	
	Family	–	–	nil	
	Group Dayhome	–	–	708/centre	
	Nursery	–	–	708/centre	
	School-Age	–	–	1,000/centre	
	FOR STAFF SALARY ENHANCEMENT				
	Centres	–	–	$1,300/trained worker	
	Nursery	–	–	1,300/trained worker	
	School Age	–	–	1,300/trained worker	
	Note: Once only grants are also available for Fire Upgrading or Physical Upgrading (maximum $3,000 per centre)				
ONTARIO	Direct operating grants are based on a funding formula and differ from program to program. An evaluation of the first year showed that 85% of the public expenditure went to augment salaries and benefits and 15% was used for non–salary purposes. Average wage increase for staff in non–profit centres was 18% and in private centres was 12%.				
	Estimate of the average daily grant to centres and family dayhome agencies is:				
	all ages	$3/space	–	–	

TABLE 2:
Continued

PROVINCE		$/DAY	$/MO	$/YR	COMMENTS
QUEBEC	OPERATING GRANTS				To Non–profit programs only
	For infants under 18mos.				
	Centres	$5.75/space	–	–	
	For all preschool aged children				
	Centres	$4.50/space	–	–	
	Agencies	2.75/space	–	–	(family care)
	For School-Age children		–	$200/child	
	For School-Age children	–	–	100/child	(for food in poor areas)
	HOUSING GRANTS				
	Centres	–	–	$9,000/ctr.	(for heat, power, rent or mortgage)
NEW BRUNSWICK	Centres only	–	$13.55	$162.50	per child
NOVA SCOTIA	OPERATING	$15.25/eligible space		–	To non–profit
	EQUIPMENT	.40/subsidy space		–	programs only
	SALARY ENHANCEMENT	2.00/subsidy space		–	(to April/91)
		3.25/subsidy space		–	(April 91 –)
P.E.I.	CENTRES	$ 1/space	–	–	
	Note: 10% may be spent on equipment, 10% on operating and the remaining 80% on salaries. There are supplementary annual grants for kindergarten care and school-age.				
	FAMILY DAYHOME	–	–	$500	
	SCHOOL READINESS PROGRAMS			$100/session	
	INFANT INCENTIVE GRANTS				
	FAMILY DAYHOMES	–	–	$250	To those who take at least one infant
NEWFOUNDLAND		$ .20/space			To both Profit and Non–profit
	Note: Paid annually in April for full time spaces only				
YUKON	CENTRES				
	0 – 18 mo	–	$60/space	–	To Non–profit
	special needs	–	60/space	–	
	18mo – 6 yr	–	40/space	–	Outside Whitehorse
	18mo – 6 yr	–	25/space	–	In Whitehorse
	FOR WORKERS				
	Trained	$.60/hour	–	–	
	In training	.40/hour	–	–	
	FAMILY DAYHOMES	–	–	$750	
	Note: There are also annual enhancement grants available for renovation (up to $10,000) toys and equipment (up to $5,000)				
N.W.T.		Available (No details)			

TABLE 3:
OVERVIEW OF PROVINCIAL AND TERRITORIAL CHILD CARE SUBSIDIES (1990)

PROVINCE	NET MONTHLY INCOME LEVELS[1] 1 PARENT/1 CHILD	2 PARENTS/2 CHILDREN	MAXIMUM SUBSIDY[2] PER CHILD/DAY	MINIMUM[3] USER FEE
B.C.	$987	$ 1244	$ 7.19 – $ 22.76	–
ALBERTA	$1530	$ 1930	$13.33	$40/month
SASKATCHEWAN	$1639	$ 1739	$11.20	10% of fee
MANITOBA	$1059	$ 1456	$12.80	$260/year
ONTARIO	$1006	$ 1686	$47.52	–
QUEBEC	$2291	$ 3875	$12.70	$250/year
NEW BRUNSWICK	$931	$ 1015	$ 7.00 – $ 14.00	–
NOVA SCOTIA	$1043	$ 1163	$14.00	$1.25/day
P.E.I.	Under Review		$16– $ 20	–
NEWFOUNDLAND	$1520	$ 1610	$17.14	–
YUKON	$1384	$ 2094	$ 8.33 – $ 21.42	–
N.W.T.	Varies with Region		$ Up to full cost	–

NOTES: 1 Net income levels may be increased slightly in some provinces by credits for employment and other costs. In B.C. for example, $300/mo may be added to the net monthly income level where an adult in the family is employed or a student; $125/mo may be added for each disabled person or person over 65 in the family unit. As well, the Federal Family Allowance is exempt from the calculation of the net income level. Saskatchewan uses gross income in their calculation.
If a family's net monthly income level is at or below the levels noted above, that family would be eligible for the maximum monthly child care subsidy.

2 Maximum subsidy is reduced, usually by $.50, for every dollar earned over the noted level.

3 Some provinces require parents to pay a minimum user fee for child care regardless of their income level. Some provinces, like Ontario, contract with facilities for a specific number of subsidized spaces and place a ceiling on the fee that may be charged by the facility for the subsidized space. Other provinces, like B.C., expect the parent to pay the difference between the maximum allowable subsidy and the actual cost of care charged by the facility.

TABLE 4:
SUMMARY OF PROVINCIAL AND TERRITORIAL
CHILD CARE PROGRAMS FOR ABORIGINAL CHILD CARE

November, 1990

PROVINCE	
B.C.	There are 11 native child care centres on reserves, four of which are sponsored by INAC.
ALBERTA	Reserve child care centres are eligible for provincial operating grants if they meet provincial licensing standards. In 1984/85, 18 of the 42 Alberta Indian Bands operated child care centres; seven of these met standards.
SASKATCHEWAN	Child care may be operated by Indian Band Councils and is not licensed as the Saskatchewan government considers "native people to be a federal responsibility". The two off-reserve Native-run centres have no provincial funding.
MANITOBA	There are approximately 80 reserves governed by 61 Indian Band Councils. Five unlicensed child care centres on Native land receive provincial and/or federal funding. The recent Manitoba Child Care Task Force Report called for "community based, aboriginal controlled, aboriginal staffed child care, to strengthen aboriginal culture."
ONTARIO	As of March 1989, there were 33 licensed child care centres (approximately 800 spaces) administered by Bands on Native reserves. Ontario provides social services to reserve residents and treats Bands in a manner analogous to municipalities for child care purposes and with respect to the Day Nurseries Act. Expenses are cost shared through the 1965 Indian Welfare Agreement between Ontario and the federal government.
QUEBEC	There are 14 Inuit communities in northern Quebec but only one Inuit child care centre. There is one unlicensed Native child care centre on Maniwaki reserve at which INAC pays the coordinator's salary.
NEW BRUNSWICK	There is one licensed child care centre on a Native reserve.
NOVA SCOTIA	There are several unlicensed child care centres on Native lands. INAC reimburses the child care costs of status Indians.
P.E.I.	There is one kindergarten on Native land.
NEWFOUNDLAND	No licensed care on Native land. There is one Inuit centre.
YUKON	Three Bands have constructed and operate child care centres with funds provided by the Yukon government.
N.W.T.	In 1989, there were eight child care centres in seven Inuit communities. Arctic College in Igaluit began operating an Inuit child care worker satellite program in 1989. There is one Native kindergarten funded by the territorial government.

Source: Child Care Information Sheets, The Centre for Urban and Community Studies, University of Toronto, 1990.

TABLE 5:
SUMMARY OF PROVINCIAL AND TERRITORIAL CHILD CARE PROGRAMS FOR SPECIAL NEEDS CHILDREN

November, 1990

PROVINCE	
B.C.	In 1988/89 MSSH contracted with 93 programs to supply 1,366 specialized spaces at a cost of $8,110,037. They also provided coupons for use in other licensed facilities for approximately 356 special needs children at a cost of $2,169,189. There is no income test for families of special needs children and they are not required to contribute to the cost. • **1988/89 Expenditure, $10,279,226 for 1,722 children, $5,969 per child**
ALBERTA	In 1988/89 the special allowance paid to day care facilities to assist with the integration of 400 special needs children cost the Alberta Government $1.7 million or $4250 per child. • **1988/89 Expenditure, $ 1,700,000 for 400 children, $4,250 per child**
SASKATCHEWAN	Grants of $200 /month/child are made to facilities for the purpose of assisting with supervision costs incurred in the care of special needs children. A supplementary grant of $50/month/child is made to cover the purchase of specialized equipment and services. In exceptional cases this grant may be increased to $100/month/child. • **Expenditure 04/01/90 - 09/30/90 for 121 children: $160,211 or $ 1,324 per child**
MANITOBA	In 1988/89, through a variety of grants to assist facilities to integrate into their care children with disabilities, the Manitoba government spent $1,103,700. These grants are: Start - Up — Centres — $541/child — Once Supplementary — Centres — $ 9.20/day/child Operating — Nursery — 4.60/day/child School-Age — 5.40/day/child — In term School-Age — 9.20/day/child — Holidays Family — 4.60/day/child Staffing — Centres — $1,622/billing period Spec.Services — Centres — $1,500/year Nursery — 750/year School-Age — 1,500/year • **1988/89 Expenditure, $ 1,103,700 for 459 children, $2,405 per child**
ONTARIO	1988/89 expenditure on Special Needs Care in Ontario was $19,879,000. Time limited funding is available on a project by project basis to increase the availability of integrated settings. (Further analysis of the Special Needs expenditure not currently available). • **1988/89 Expenditure, $ 19,879,000**
QUEBEC	• **1988/89 Expenditure, $ 983,000, $ 4,199 per integrated child**
NEW BRUNSWICK	Centres are encouraged to integrate special needs children. Number of special needs children not available. • **1988/89 Expenditure, $ 207,805 through subsidy program**
NOVA SCOTIA	Full-fee parents pay $15.25/ day and the province will pay the remainder up to $21 day. Number of special needs spaces 125. No breakdown of special needs expenditures available.
P.E.I.	To encourage integration and allow for appropriate, individualized programs, funding is available to licensed centres to employ additional staff. **1988/89 Expenditure, $ 348,373**
NEWFOUNDLAND	A family may apply for daycare subsidy for a special needs child. They must meet income and social need criteria. **1988/89 Expenditure, $147,840**
YUKON	No analysis available
N.W.T.	No analysis available

Sources: 1) Information received from the Provinces and Territories either in print or by phone.
2) Child Care Information Sheets, The Centre for Urban and Community Studies, University of Toronto, 1990.

TABLE 6:
OVERVIEW OF PROVINCIAL AND TERRITORIAL CHILD CARE REGULATIONS (1990)
MAXIMUM NUMBER OF CHILDREN ALLOWED IN LICENSED FAMILY DAY CARE
(including provider's own children)

B.C.	Up to 7 children under 12 years of age. A maximum of 5 preschoolers, no more than 2 under 2 yrs, no more than 1 under 1.
ALBERTA	Up to 6 children. No more than 3 under 3 years, no more than 2 under 2 years.
SASKATCHEWAN	Up to 8 children. No more than 5 under 5 years, no more than 2 under 3 months.
MANITOBA	Family Day Homes : Up to 8 children under 12 years. No more than 5 children 3 to 6 years, no more than 3 children under 3 years. Group Day Homes : 8 to 12 children under 12 years. No more than 3 children under 2 years. 2 providers.
ONTARIO	Up to 5 children under 12. (Agency Supervised) No more than 2 under 2 years or 3 under 3 years.
QUEBEC	Up to 6 children. (Agency Supervised) No more than 2 under 18 mos. If provider is assisted by another adult up to 9 children may be cared for, no more than four of which may be under 18 months.
NEW BRUNSWICK	Up to 6 children. No more than three infants.
NOVA SCOTIA	Not covered by legislation.
P.E.I.	Family Day Homes: No more than 7 children. Group Day Homes: More than 7 but fewer than 12.
NEWFOUNDLAND	No ceiling.
YUKON	No more than 4 infants, no more than 6 preschoolers when 3 are infants, no more than 8 preschoolers when none are infants.
N.W.T.	No more than 8 children under 12, where no more than 6 are under the age of 5, and no more than 3 are under 3 years and 2 under 2 years.

TABLE 7:
OVERVIEW OF PROVINCIAL AND TERRITORIAL CHILD CARE REGULATIONS (1990)
MAXIMUM NUMBER OF CHILDREN ALLOWED IN UNLICENSED CARE
(excluding provider's own children in all cases but Quebec, which includes provider's own)

B.C.	No more than 2 children.
ALBERTA	No more than 3 children.
SASKATCHEWAN	No ceiling.
MANITOBA	No more than 4 under the age of 12, no more than two under the age of 2 years.
ONTARIO	No more than 5 children.
QUEBEC	No more than 6 children (as of July 1, 1991).
NEW BRUNSWICK	No more than 4 children, of which 2 may be infants.
NOVA SCOTIA	No more than 3 children.
P.E.I.	No more than 3 children if all are younger than 2 years. No more than 5 children if 2 are younger than 2 years. No more than 6 children if group include children up to 10 years and if no more than 2 are under 2 years.
NEWFOUNDLAND	No more than 4 children.
YUKON	No more than 3 children.
N.W.T.	No more than 4 children.

APPENDIX E

A NEW FUNDING STRATEGY PROPOSED FOR CHILD CARE IN ONTARIO

A NEW FUNDING STRATEGY PROPOSED FOR CHILD CARE IN ONTARIO

Source: The Ontario Coalition for Better Child Care

The Ontario Coalition for Better Child Care recently reviewed the delivery and funding of child care in that province. Although, over the past decade, the Ontario Government has significantly increased its spending on child care and has introduced a variety of new programs, the Coalition found that many of the problems being faced by both parents and providers in 1981 still exist today. As a result they have proposed, for discussion, "a framework for a new child care system". The key elements of the proposal are:

Each child care program will be fully funded by the provincial government, which will be responsible for cost recovery through a separate administrative system.

- Child care programs will no longer operate on a fee-for-service basis;
- All non-profit child care programs will become provincially funded services similar to other child welfare and education programs;
- Child care programs will be directly funded based on annual budgets approved by the provincial government in accordance with provincial guidelines; and,
- Recovery of costs from parents and other levels of government will be the responsibility of the provincial government.

The proposed system will be operated by non-profit societies, municipalities or Indian Bands. Existing for-profit programs could become part of the provincial child care system by conversion to non-profit status; those not choosing to convert will continue as they are currently. The system will be comprehensive and will include full-day, half-day and part-time group care, family day care, school-aged programs, parent/child resource centres and flexible services where needed. Local community planning of services will be an integral component. The proposed funding arrangements for the restructured child care system are:

- that the Province would fully fund non-profit and publicly operated child care services;
- that parents would contribute to the revenue of the child care system on a sliding scale based on an income test; and,
- that the Province would maximize recovery of the federal cost sharing currently available through CAP.

One of the intents of the proposal is to consolidate the funding of child care into a single delivery system. Currently, a number of funding mechanisms are administered by a variety of departments in the Ministry of Community and Social Services. Consolidation should make use of existing personnel and resources in a more cost effective manner. The Coalition has estimated implementation costs at $15 million. (The 1990 Ontario Budget estimate for child care spending is $257 million.)

This summary outlines briefly only the funding proposals of the Coalition's Working Paper. Cost assumptions put forward are specific to Ontario.

Summary prepared for the Task Force on Child Care, January 1991

APPENDIX F

COMMUNITY CARE
FACILITIES BRANCH
CHILD CARE CENTRES LICENSING

QUICK REFERENCE GUIDE

TYPE OF SERVICE	AGES	HOURS	TOTAL CAPACITY	SPACE
1. **GROUP DAY CARE**	Under 36 Months	Maximum of 13 hours per day.	Maximum of 12 per group.	3.7m^2 per child, 1 toilet and hand basin per 12, 7m^2 of outdoor play area.
2. **GROUP DAY CARE**	30 Months to School-Age	Maximum of 13 hours per day.	Maximum of 25 per group. Not more than 2 children under 36 months in facility.	3.7m^2 per child, 1 toilet and hand basin per 10 children, 7m^2 of outdoor play area.
3. **PRESCHOOL**	30 Months to School-Age	Maximum of 4 hours per day.	Maximum of 20 per group and maximum of 3 groups of 20.	3.7m^2 per child, adequate outdoor play space,1 toilet and hand basin per 10 children.
4. **FAMILY DAY CARE**	Birth to School-Age, max. of 1 child under 12 mo. or 2 children under 2 years.	Maximum of 13 hours per day.	5 children (preschool) & 2 school age children, including the operator's own, max. cap. 7	Sufficient space for play & sleep areas, 1 toilet and hand basin per 7 children.
5. **SPECIALIZED NEEDS DAY CARE** For facilities which have 25 to 100% of children in the Special Needs	Birth to School-Age	Maximum of 13 hours, 12 per group for children under 36 months.	Maximum of 15 per group for children over 36 months.	4.2m^2 per child, 7m^2 outdoor play area, 1 toilet and hand basin per 8 children.
6. **OUT OF SCHOOL CARE**	6 to 12 years	Maximum of 13 hours per day.	a) Kindergarten or Grade 1, 20 max. per group, 3 groups of 20. b) Grade 2 or above, 25 max. per group, 3 groups of 25.	3m^2 per child, fenced outdoor play area. 1 toilet and hand basin per 15 children.
7. **CHILDMINDING**	18 months to School-Age	3 hours per day, 2 days a week.	Maximum of 16/group if one or more children under 3. Maximum 20/group if all children are 3 yrs or more.	3m^2 per child.
8. **RESIDENTIAL CARE FOR CHILDREN**	Birth to 19 years	24 hours per day.	Depending on physical space available and meeting all municipal enactments.	1 child per bedroom/7.4m^2. 2 children per bedroom/5.6m^2 per child plus extra 1m^2 for each child in wheelchair. 1 toilet and hand basin per 1-5 children. 1 bathtub with shower per 1-10 children.
9. **EMERGENCY CARE**	Children who have not entered Grade 1	Not more than 72 hours of care per calendar month.	Children under 3 years in groups of 1-12. Children over 3 years in groups of 1-25.	3.7m^2 per child. 1 toilet and hand basin per 10 children.

Refer to Child Care Regulation for detailed information
Revised March 1990

MINIMUM STAFF QUALIFICATIONS	UNDER 36 MONTHS STAFF RATIO	SPECIAL REQUIREMENTS
Qualified infant and toddler educator. Assistants should be qualified E.C.E. in the process of completing Under 3 training. First Aid Certificate required.	1-4 children/1 infant/toddler educator (I.T.E.), 5-8 children/1 I.T.E. and 1 assistant, 9-12 children/1 I.T.E. and 2 assistants. Maintain 1 educator to 4 children ratio.	Change table. Proper disposal area for soiled clothing, provision for individual toilet articles & storage for clothes, sleeping arrangement for each child, fenced play area.
Qualified Early Childhood Educator (Assistants must be in process of Early Childhood Education) First Aid Certificate required.	1-8 children/1 E.C.E., 9-16 children/1 E.C.E. and 1 assistant. 17-25 children/1 E.C.E. and 2 assistants.	Fenced play area, facilities for food preparation, sleeping arrangements for each child, separate area and equipment for each group, container for soiled clothing.
Early Childhood Educator (Assistants must be in training), First Aid Certificate required.	1-15 children/1 E.C.E., 16-20 children/1 E.C.E. and 1 assistant.	No sleeping arrangements required. Fenced play area and equipment for each group.
Responsible adult with some experience in recreation, education, social work or child care. First Aid Certificate required.	1-7 children to 1 responsible adult.	Sleeping arrangements for each. Adequate play equipment. Fenced play area. Container for soiled clothing.
Special needs educator for each group. First Aid Certificate required.	Group of 1-4 children/1 Special Needs Educator, Group of 5-8 children/1 Special Needs Educator plus 1 E.C.E., 9-12/1 Special Needs Educator plus 1 E.C.E, 13-16/1 Special Needs Educator plus 2 E.C.E. and 1 assistant.	Ramps, grab bars, sleeping arrangements must be available for children in attendance over 4 hours, specialized play equipment. Container for soiled clothing, change table, and wash basin convenient to table. Fenced play area.
Responsible adult with some experience, recreation, education or child care. First Aid Certificate required.	Where any child is in kindergarten or Grade 1: 1-10 children/1 responsible adult, 11-20 children/2 responsible adults. Where all children in Grade 2 or above: 1-15 children/1 responsible adult, 16-25 children/2 responsible adults.	Fenced outdoor play area.
Responsible adult with some experience.	Where any child is under 3 years, 1 adult to 4 children or fewer. Where all children are 3 years or more, 1 adult to 8 children or fewer.	Change table for children under 3.
Responsible adult with some experience in social work or child care. First Aid Certificate required.	Appropriate to needs of children approved by the Board.	Ramps, grab bars, if children in wheelchairs. Bedroom size, no more than 2 children in each bedroom. Screening to provide privacy when 2 people are accommodated in 1 bedroom and personal care is given. Placement made by the Ministry of Human Resources.
Staff qualifications as per group Day Care #1 and 2.	As per Staff Ratio mentioned above for Group Day Care, Under 36 months for children in that age group. As per Staff Ratio mentioned above for Group Day Care 30 months to School-Age.	Fenced outdoor play area. Sleeping arrangements for each child. Container for soiled clothing.

APPENDIX G

ONE SMALL STEP

ONE SMALL STEP

PURPOSE OF THE BAY AREA EMPLOYER CHILD CARE COALITION

The Bay Area Employer Child Care Coalition is a consortium of private and public sector employers who are concerned about increasing the number of Bay Area organizations who assist their employees in managing their work and family responsibilities. This coalition was convened by the United Way of the Bay Area.

As a part of their commitment, each member of the Coalition will either develop a new child care policy or expand an existing policy. Coalition activities and publications provide members with strategies and practical tools for charting appropriate courses of action for their own workplaces. To join One Small Step, all we expect is that an employer take at least one of the small steps we outline in this brochure.

This brochure is organized to help you assess your company's current child care needs and policies, and determine which steps you can take to help your employees manage their work and family responsibilities. You may be surprised to learn that there are a number of small steps an employer can take which cost relatively little money, but can be of great assistance to employees with dependents. It is important to note that elder care and child care share many similarities, and it is wise for employers to plan organizational policies that will address the broad range of family needs.

FIRST STEPS

Among your first steps should be an assessment of what you are already doing to assist your employees with their child care needs. In some instances, you can have a major impact by promoting or expanding your current policy.

We recommend that each organization assess its own needs based on a combination of employee demographics, corporate cultures and cost. Many corporations, such as Chevron, have surveyed their employees only to learn that the majority did not want or need a child care center built, but rather preferred other benefits which would help them such as flex benefits and family sick leave.

To summarize, these first steps include:

1. Assess current policies/practices;
2. Determine employee needs and preferences (e.g., focus groups, questionnaires);
3. Assess your corporate culture;
4. Consider establishing a joint employee-employer committee.

SECOND STEPS

After you have assessed your current practices and employee needs, a second step would be to enhance your policies. There are a wide range of policies which an employer could implement to support their employees. They vary according to cost and time required by an individual organization.

We have grouped these options into three categories based on their level of involvement and time and cost requirements: First Steps; Second Steps; and Hitting Your Stride.

As we learned from surveying Coalition members, different employers will apply different criteria for categorizing these options. Some general determinants of first steps are whether options are: low in cost, low in staff involvement and time, easy to implement, non-controversial, or least disruptive to the work environment. Informational and educational programs, such as Resource and Referral for parents or Management Seminars, are also widely implemented first steps.

Many employers are finding that making schedules more flexible is a low cost option that requires

minimal management. Employees can choose the length of their day-when they start, leave and take lunch. They can "Pick n Stick" to the same schedule all week, debit and credit hours as long as their hours add up to 40 hours a week, or compress their work week into 4 days.These alternative arrangements can often make a significant difference for parents juggling demands such as child care pick-up or drop-off times, doctors appointments, and so on.

Another critical problem today is the need to care for sick children. Currently, many employees are forced to lie in order to use their sick time to care for their children who are ill. Simply changing sick leave policy to allow employees to use their own personal sick leave to care for an ill child or dependent can have a major effect on a parent's life and create a sense of honesty and trust between an employer and employee. Several companies which have instituted such policies have found no increase in sick time usage. Rather, parents were careful to save those sick days in anticipation of their children's needs.

First Steps*

- Resource and Referral (R&R)
- Management Seminars
- Family Sick Leave
- Parental Leave
- Flextime
- Regular Part-time Employment
- Community Service Fairs at Workplace

Second Steps*

- Dependent Care Assistance Program
- Job Sharing
- Voluntary Reduced Work Time
- Flex Benefits
- Family Day Care Networks
- Sick Child Care
- Emergency/Back-up Care
- Discounts at Local Child Care Programs
- Donating to Community Services

Hitting Your Stride*

- Flexiplace
- Corporate Match
- Child Care Vouchers
- Before and After School Programs/Summer Camps
- Child Care Centers-On site/Near site/Consortium

*See Child Care Glossary for descriptions.

BENEFITS TO EMPLOYERS

Some of these changes in policy can increase the loyalty, productivity and satisfaction of your employees. An honest appraisal of the child care problems faced by your employees can result in increased trust between employee and employer. Increasingly, assistance with dependent care is becoming so important to prospective employees, that it has become an important recruitment tool.

ONE SMALL STEP MEMBERSHIP

One small step consists of over 60 public and private organizations representing industries such as higher education, law, banking, healthcare, television, human services, insurance, manufacturing, computer systems, advertising, accounting, utilities as well as several municipalities. Participating organizations are in varying stages of planning or implementing one or more of the steps we described to help their employees manage their work and family responsibilities.

Members are available to assist you by providing comments on their organization's experiences. Contact the Coalition office for referrals.

The Coalition also offers a resource publication entitled "First Steps: A Current Look at the Environment, Issues and Policies of Child Care." This report provides in-depth analysis of different policy options, highlights model programs in the Bay Area and nationally, and includes union developments, small business considerations and guidelines for communication of programs.

RESOURCES

International and National

International Child Resource Institute	(415)644-1000
Child Care Action Campaign	(212)239-0138
New Ways to Work	(415)552-1000
The Bureau of National Affairs	(800)372-1033
The Conference Board, Work and Family Center	(212)759-0900
U.S. Department of Labor, The Women's Bureau	(415)744-6679
Work/Family Directions	(617)923-1535

State & Local

Statewide

California Child Care Resource & Referral Network	(415)661-1714
Child Care Law Center	(415)495-5498
Department of Social Services - Child Care Ombudsman Program	(916)324-4038

Alameda County

BANANAS	(415)658-0381
Child Care Coordinating Council of Alameda County	(415)582-2182
Resources for Family Development	(415)455-5111

Contra Costa County

Contra Costa Child Care Council	(415)676-5437

Marin County

Project Care for Children	(415)454-7959

Napa County

Community Resources for Children	(707)253-0366

San Francisco County

Children's Council of San Francisco	(415)864-1881
Wu Yee Resource and Referral	(415)391-8993

San Mateo County

San Mateo Child Care Coordinating Council	(415)692-6647

Santa Clara County

Child Care Coordinating Council of Santa Clara County	(408)947-0900

Solano County

Solano Family & Children's Council	(707)422-2881

Sonoma County

Community Child Care Council of Sonoma County	(707)544-3084

A CHILD CARE GLOSSARY

- **Before and After School Programs/Summer Camps** – These are usually school and/or community based. Curricula vary, though most offer a balance of recreation and cultural enrichment. Parent participation is broadly encouraged. Summer camps are most often day camps.
- **Child Care Centers – On-site/Near-site/ Consortium** – Licensed centers for child care based within the worksite, nearby, and/or run in cooperation with other nearby companies.
- **Child Care Vouchers** – Employer may subsidize a portion of the employee's child care costs for programs selected by the parent. The company may pay the provider directly or reimburse the employee.
- **Community Service Fairs at Workplace** – Information fairs held at workplace by community agencies either during normal workdays or on weekends. Provide information to employees on topics ranging form how to locate quality child care to infant safety.
- **Corporate Match** – An employer agrees to provide a certain dollar amount or percentage towards child care cost incurred by an employee.
- **Dependent Care Assistance Plan (DCAP)** – A salary reduction program whereby an employee can use pre-tax dollars to pay for eligible expenses for care of a child, an elderly dependent or an incapacitated spouse living in his/her home. Re: IRS guidelines, a maximum of $5,000 per year may be deducted.

- **Discount at Local Child Care Programs** – By taking advantage of economies of scale, an organization can arrange for a discounted rate at local child care facilities for their employees.
- **Donating to Community Services** – An employer can provide a range of philanthropic services such as extra space or facilities which may be available so that a child care center or referral service could be developed. Staff could be loaned to child care facility for such services as legal or financial expertise, or to serve as a director on a board. Corporate contributions could be made to local child care programs or loans given to help establish a new center or referral program.
- **Emergency Back-Up Care** – Refers to situations such as the illness of a child, the illness of a provider, difficulties with transportation, school holidays, overtime schedules, and short notice of travel. Employers can establish direct care services (weekday and/or weekend), assist employees with making necessary arrangements, or help with financial contributions.
- **Family Care Networks** – These are licensed by the county or state to care for a small group of children in the provider's own home. A family day care network is a group of homes, under the auspices of one administrative agency, which offers support services to the individual providers, such as substitute caregivers, ongoing training and technical assistance, food subsidies, co-op purchasing, equipment and toy loan, parent referrals. Developers and/or employers can form their own network of homes or contract with an existing network.
- **Family Sick Leave** – Benefit whereby an employee may use his/her personal sick leave to care for an ill/injured dependent family member.
- **Flex Benefits** – A "cafeteria" plan of benefits qualifying under Section 125 of the Internal Revenue Code which allows employees to choose from a "menu" of taxable and non-taxable benefits. In its simplest form, a plan can allow employees to reduce their pay in exchange for non-taxable dependent care benefits, i.e., DCAP.
- **Flexiplace** (also called "telecommuting") – Gives regular employees the option to work off-site (at home or at a satellite office near their home) during part or all of their scheduled work time.
- **Flextime** ("flexible work time") – This refers to a work schedule that permits employees to choose their starting and quitting times within limits set by managements.
- **Job Sharing** – A form of regular part-time employment where two employees share one full-time position with salary and benefits prorated.
- **Management Seminars** – Seminars held within corporations to make supervisors more sensitive to employees with child care needs.
- **Parental Leave** – Leave that allows parents time off from work following childbirth or adoption so that they may care for their child and obtain satisfactory child care arrangements. Paid or unpaid, it usually follows short-term disability leave for childbirth for female employees.
- **(Regular) Part-Time Employment** – Less than full-time work that includes job security and all other rights available to regular full-time employees.
- **R & R - Resource and Referral** (also known as Information & Referral) – A program that assists parents in locating child care communities and educates them in becoming better consumers of child care. This service is usually provided by community agencies. In California, there are state funded child care resource and referral agencies in every county.
- **Sick Child Care Services** – Programs that provide care for mildly ill children while their parents work. This care may be provided in one of three categories: in-home sick child care, care in the child's regular care setting and care in a special sick child care facility.
- **Voluntary Reduced Work Time** ("VTime") – A time income tradeoff arrangement that allows full-time employees to reduce work hours for a specified period of time with a corresponding reduction in compensation. Differs from regular part-time work in that there is a process defined for return to full-time status.

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GLOSSARY

TASK FORCE ON CHILD CARE

GLOSSARY

ABORIGINAL OWNED AND CONTROLLED CHILD CARE

- child care emerging from the needs of aboriginal people and governed by them in order to meet these needs.

CAREGIVER

- a person providing child care on an ongoing basis. The person may be either employed directly by the parents to care for the children either in their own home or in the caregiver's home or (s)he may be an employee in a licensed child care facility.

CHILD CARE SERVICE

- a service that supplements parental care enabling parents to fulfil work, study or other obligations.

CHILD MINDING FACILITY

- a program which may provide care for children 18 months to school entry. Maximum group size for children under 3 years is 16 and for over 3 years is 20. Staff are not required to have Early Childhood Training. Children may not attend for more than three hours a day, twice a week.

EARLY CHILDHOOD EDUCATION (E.C.E.)

- a course of study which is most commonly offered at a community college or through a continuing education program and which is required for those who wish to become Registered Early Childhood Educators. Minimum length of the basic Early Childhood Education Program is currently ten months but a degree program is also available through four years of study at the University level. Post-basic training is offered in infant/toddler and special needs care.

  Assistant Early Childhood Educator
  An individual who is in the process of completing the basic Early Childhood Education training program or who has been issued advance credit from the Provincial Child Care Facilities Licensing Board for related training.

  Registered Early Childhood Educator
  An individual who has completed the basic Early Childhood Education (or its equivalent) training program and who has fulfilled the 500 hours of documented satisfactory work experience requirement in Canada under the direction of a Registered Early Childhood Educator in not more than two community care facilities licensed in any category for children from birth to school age.

  Registered Infant/Toddler Educator
  An Early Childhood Educator who has completed the post basic Infant and Toddler training program.

  Registered Special Needs Educator
  An Early Childhood Educator who has completed the post basic training in the specialized area of Early Childhood Education Special Needs Training.

EMPLOYER SUPPORTED CHILD CARE

- any involvement by an employer or a business which assists employees with child care. Such involvement can be divided into four broad areas: providing services, offering information, easing financial burden and freeing up time. The involvement might include:
  - financial support for on-site or near site child care centres. Such support might take the form of one or all of the following: provision of some or all of the start-up costs, provision of some or all of the ongoing operating costs. Assistance with start-up and initial costs is the most frequent form of financial support for centres.
  - services set up or contracted for by employers to provide information, support and referral to working parents in need of child care services

and parenting information. In some instances existing Employee Assistance programs have been expanded to include these concerns.

- cash subsidies paid directly to employees with children through vouchers; arrangements with community-based services for discounted spaces reserved for their employees; flexible benefit programs in which dependent care is an option.
- flextime, part-time work, job sharing, personal leave allowances for when family members are ill.

◆ Work place child care initiatives may involve, or be initiated by, labour unions or employee groups.

FAMILY DAY CARE HOME

◆ child care offered in the caregiver's own home. Licensed Family Day Care may provide care to children from birth to 12 years with a maximum of 5 preschool and 2 school-aged children including the operators own. Only one child can be under the age of 12 months or two children under the age of 2 years. Family day care homes providing care for one or two children unrelated to the caregiver are not required to be licensed.

FTE

◆ Full time equivalents

GAIN

◆ Guaranteed Available Income for Need. Basic GAIN helps eligible recipients to meet the cost of fundamental living expenses. It consists of a monthly shelter allowance determined by the family's actual shelter and utility costs up to a maximum, and a monthly support allowance. Benefit levels are based on family size and is intended as a temporary financial help in time of need. Eligibility for Day Care Subsidy is based on the criteria established by the GAIN Regulations.

GROUP DAY CARE

◆ the provision, in a group setting, of care to children and opportunities for their social, emotional, physical and intellectual growth.

ILLEGAL CARE

◆ Community Care Facility Act requires a license where an individual is caring for three or more children unrelated to them by blood or marriage. Children cared for in these settings are in illegal care.

INFANT/TODDLER CARE

◆ child care for children under the age of three years with infants defined as 0 - 18 months and toddlers defined as 18 - 36 months.

LATCH-KEY CHILDREN

◆ school-age children at home after school without adults.

LICENSED CHILD CARE FACILITY

◆ a facility that meets the requirements of the Community Care Facility Act and the Child Care Regulation and which provides care, supervision, and opportunities for social, emotional, physical and intellectual growth of children. Licensed child care facilities in British Columbia are administered under diverse auspices including: parent or community run non-profit societies, social service and health care agencies, churches, municipalities, community colleges, Indian Bands and private individuals or companies.

PRESCHOOL
(Nursery school/Play school)

◆ part-day programs usually operated on a school year basis September to June. For children 30 months to school age with a maximum group size of 20 and a staff trained in Early Childhood Education. A child may not be enrolled in a preschool more than four hours per day.

PROVIDER

◆ See Caregiver

SCHOOL-AGE CARE (licensed)

◆ child care that takes place outside normal school hours. May serve children from school entry to 12 years, maximum group size of 20 (25 for children 7 - 12 years).

SCHOOL-BASED CHILD CARE

- a licensed child care facility which occupies school land or school space provided by the local school board.

SELF CARE

- children under the age of 12 left in their own supervision.

SPECIAL NEEDS CHILDREN

- children who, because of physical, mental or emotional handicaps, require additional support and services.

SUBSIDY

- low income families may qualify through an income test administered by the Ministry of Social Services and Housing for assistance with their child care costs. Successful applicants will be supplied with an authorization form which they give to their caregiver who, in turn, may bill the Ministry for services rendered to the maximum dollar value authorized. The cost of the care is often greater than the value of the authorization, in which case the parent must pay the caregiver the difference.

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TASK FORCE ON CHILD CARE

BIBLIOGRAPHY

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